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14. ABSTRACT Cancer mortality in the USA ranks Tennessee number 43 in incidence and 5th in the nation in mortality—both numbers suggesting much work to be done. Altogether, there are over 660,000 citizens with active military or veteran status in our state constituting over 15% of the general population. Therefore, the poor cancer mortality statistics negatively affects not only the state's general population but also military and veteran families living in the state. A self-evaluation of the strengths and weaknesses of our state-wide University of Tennessee Cancer Institute programs revealed two major weaknesses impairing progress toward advancing translational research into the detection and treatment of cancer patients in Tennessee. Both are deficiencies in infrastructure: the first, is the lack of a core diagnostic and prognostic imaging facility and the second, is the lack of a core facility for investigational and therapeutic viral vector production and development. In this award we set forth the objectives to set up two core facilities at the University of Tennessee Cancer Institute: One for the generation of PET biomarkers using microfluidic chemistry and validate their effectiveness for PET/CT-based monitoring of conventional and novel anticancer therapy in animal models; The other a viral vector core for the generation of investigational tools for anticancer therapies at UT Health Science Center Memphis. These cores laboratories have been set and we successfully completed a pilot project that involved the generation of B16/F10 melanoma cells modified by lentivirus-mediated gene therapy and the in vivo PET imaging of the tumor-bearing mice.					
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Years 1 & 2

INTRODUCTION

This project set forth the goal to create the infrastructure for delivering and evaluating gene therapy based interventions against cancer.

The work was subdivided into two segments. The first part was to develop a core for the synthesis of a new positron emitting (PET) tracer, 3'-Deoxy-3'-[^{18}F]fluorothymidine: ([^{18}F]FLT), to image cancer using PET tracer ^{18}F FDG. The second part was for the development of a viral vector core (VVC) for the generation of recombinant viruses targeting cancer cells.

OBJECTIVE 1

Final report on preparing ^{18}F -FLT using micro-fluidic chemistry and the visualization of subcutaneous melanoma xenografts in mice at UTGSM

SOW 1. Microfluidic chemistry biomarker core (MCBC)

1. Design and fabricate microfluidic components
2. Design and fabricate micro HPLC components
3. Micro-PET/CT monitoring anti-cancer therapy using the B16 murine melanoma model – months

With the support of the DOD grant, we have developed and tested chemistry routes for the synthesis of 3'-Deoxy-3'-[^{18}F]fluorothymidine: ([^{18}F]FLT) using an automated microfluidic platform. In addition, we have evaluated the growth of the murine melanoma B16/F10 tumors in mice and examined methods to quantify in situ the tumor burden using micro positron emission tomography (PET) using [^{18}F]-2-fluoro-2-deoxy-D-glucose (FDG).

1. Infrastructure and Personnel

The PET biomarker core (PBC) facility is located in a dedicated PET imaging area which also houses organic chemistry laboratories, the Preclinical and Diagnostic Molecular Imaging Laboratory (PDMIL) and is adjacent to the recently completed PetNet production facility which supplies F-18 to the PBC generated on an RDS 111 (Eclipse HP) negative ion cyclotron with an 11-MeV proton energy. The laboratories within the PBC have recently been remodeled to provide areas dedicated to purification and analysis of biomarkers contiguous with the wet-lab that contains the hot-cell. To perform the synthesis of ^{18}F FLT we purchased a Minuteman Liquid Flow Microchemistry platform (Advion Biosystems, Ithaca, NY).

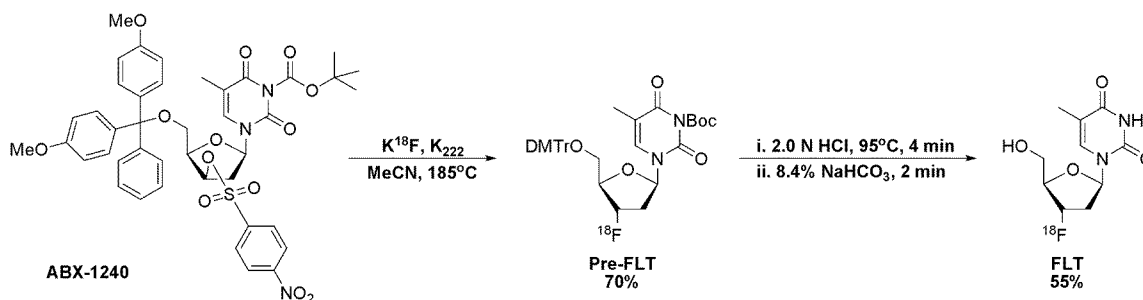
2. Microfluidic synthesis of ^{18}F FLT

3'-Deoxy-3'-[^{18}F]fluorothymidine: ([^{18}F]FLT) is a structural analog of the DNA constituent, thymidine. [^{18}F]FLT is a radiolabeled imaging agent that has been proposed for investigating cellular proliferation with positron emission tomography (PET). Although [^{18}F]FLT is not

incorporated into DNA it is trapped in the cell, due to phosphorylation by thymidine kinase, a part of the proliferation pathway. As such it has the potential to image proliferating tumor due to the increase in DNA synthesis rate.

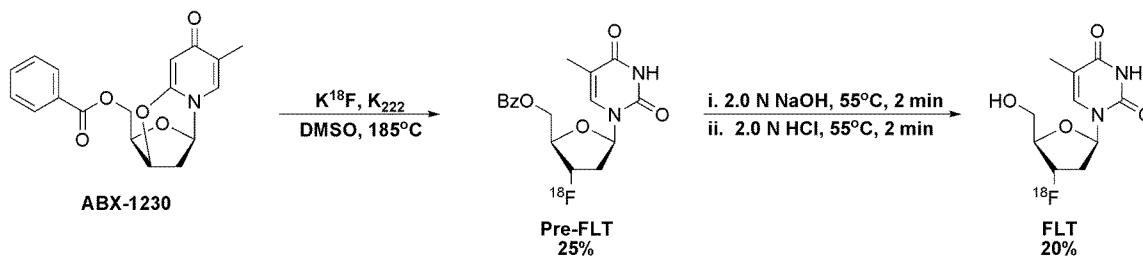
We have investigated two synthetic pathways using the NanoTek LF microfluidic synthesizer. The first involved the displacement of a nitrophenylsulfonyl group at the 3'-hydroxy position (Scheme 1). This labeling occurred in high yield in the microfluidic reactor; however the second phase of the synthesis, hydrolysis, was not nearly as efficient. A modified hydrolysis vessel was constructed and tested to provide [^{18}F]FLT for purification and QC. The overall yield of this process has been on the order of 55% from the start of synthesis.

Scheme 1: Synthesis of [^{18}F]FLT from 3-*N*-Boc-5'-*O*-dimethoxytrityl-3'-*O*-nosyl-thymidine.



Our second approach began with the more common 5'-*O*-Benzoyl-2,3'-anhydrothymidine precursor (Scheme 2). The labeling step was problematic from the beginning. We used an array of solvents and found the best was DMSO, generating a modest 25% yield in the labeling step. This reaction, however, was not reproducible in the microfluidic reactor. The benzoyl deprotection, on the other hand, was a very efficient process using 2.0 N sodium hydroxide.

Scheme 2: Synthesis of [^{18}F]FLT from 5'-*O*-Benzoyl-2,3'-anhydrothymidine.



To aid purification of [^{18}F]FLT we directly connected an HPLC to the NanoTek LF unit (Figure 1). The [^{18}F]FLT final product solution was collected using a Waters® XTerra® column (150 x 3.4 mm) and a 5% ethanol (aq) mobile phase at 2.0 mL/min. The retention time was ~ 8-10 minutes.

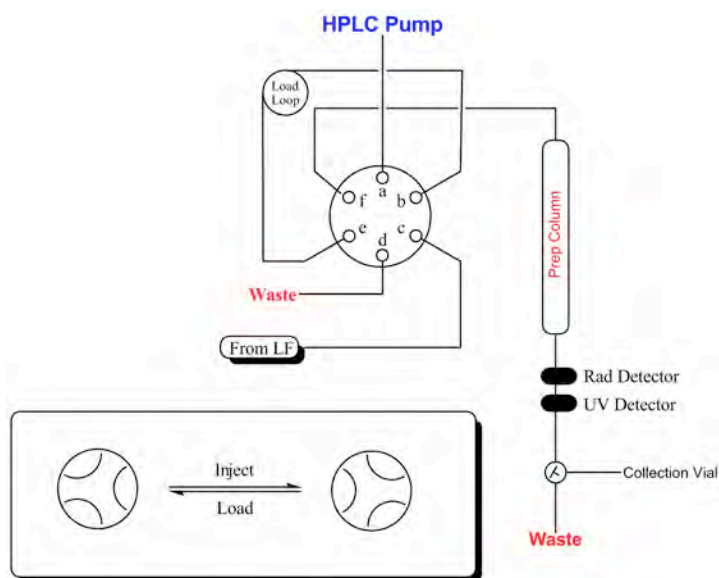


Figure 1: NanoTek LF to HPLC injector loop.

In collaboration with Dr. Giamis and his colleagues at Advion (formerly Nanotek Inc.) we also tested two different sets of automation that control the synthesis of [^{18}F]FLT:- Sequence Discovery (Figure 2) and Batch (Figure 3). The Sequence Discovery mode allows the operator the ability to quickly optimize labeling or hydrolysis reaction conditions. Unique to the Discovery modes is the joining of reagent flows at a “mixing T” prior to the reactor. As the reagents meet, in a laminar flow environment, the residence time and temperature in the reactor generate the products in high yield. The Batch mode involves the pre-mixing of the precursor and the dried [^{18}F]fluoride. The solution is then pumped through the reactor at the determined rate and temperature for optimal yield. This mode of operation will be used primarily for high radioactivity production runs.

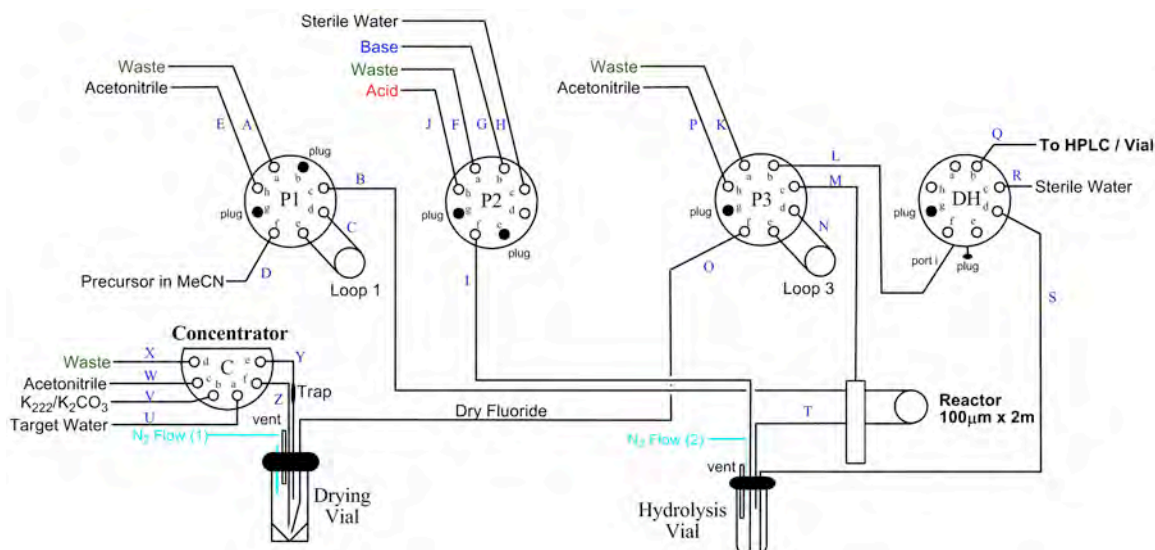
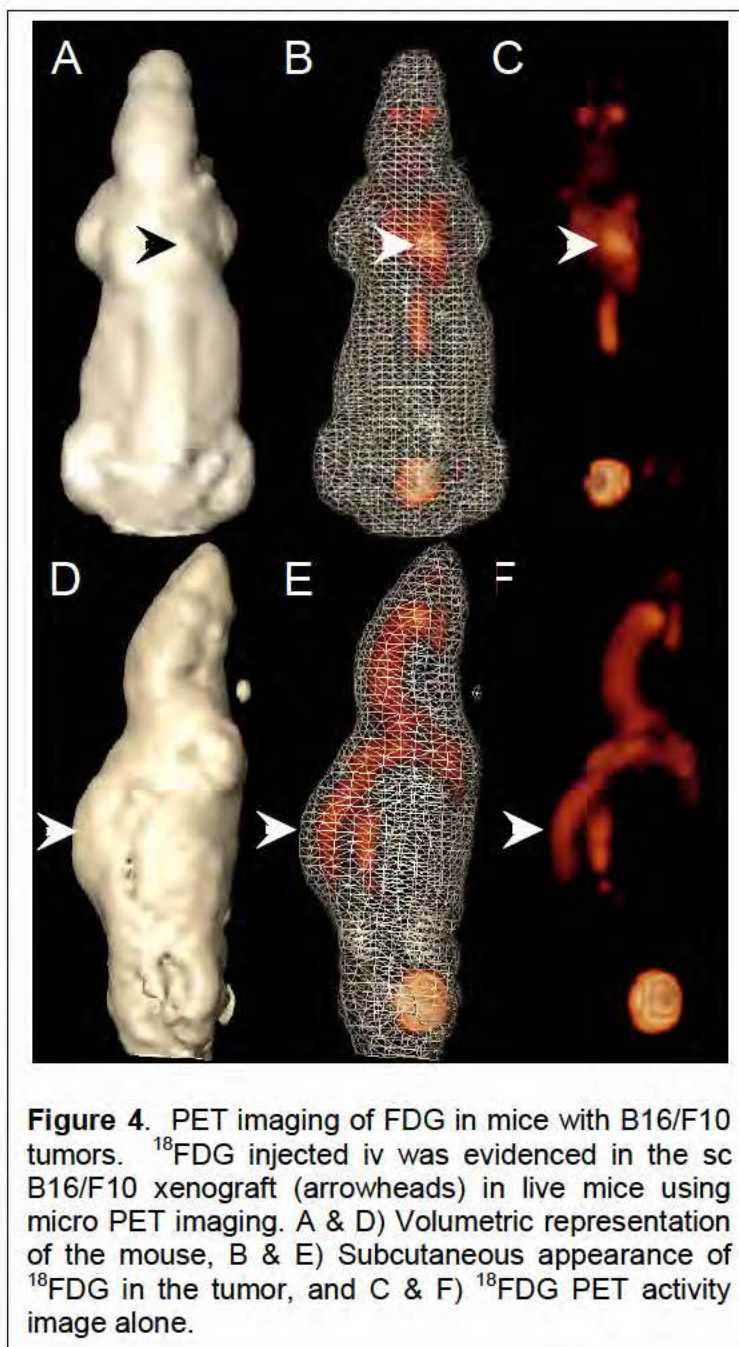


Figure 2: Sequence Discovery plumbing diagram.

3. Preliminary Studies: Live PET imaging of B16/F10 xenografts in mice



A major preliminary goal was to assess the ability of ^{18}F FLT to image melanoma xenografts implanted in C57BL/6 mice and to further compare this with the commonly used biomarker ^{18}F FDG. Unfortunately, ^{18}F FLT was never produced by our Advion collaborators and thus we have focused our attention on the use of commercially available ^{18}F FDG. C57BL/6 mice were injected with 10^6 B16/F10 murine melanoma cell sc and left for 10 days. After this time, mice received $\sim 300 \mu\text{Ci}$ of ^{18}F FDG (purchased from PetNet) and 30 min thereafter the mice were anesthetized using 1-3% isoflurane administered from a vaporizer in 2 L of oxygen and delivered through a nose-cone. The PET data were acquired using a microPET P4 apparatus (Siemens Preclinical Solutions, Knoxville, TN). The data were reconstructed using a 2D

ordered subset expectation maximization (OSEM) algorithm and are visualized using the image analysis software Amira.

The PET images revealed the presence of a subcutaneous lesion indicating uptake of [^{18}F]FDG in the lesions; however there was considerable accumulation within the interscapular brown fat, heart, and abdominal spine. Notably, the lungs were devoid of activity. We continued these experiments by introducing the B16/F10 cells iv to induce pulmonary lesions. These mice were imaged using ^{18}F FDG in order to test the efficacy of this biomarker at imaging the small lesions that develop in the lungs over a 21 day period post-injection. In addition, a procedure was adopted that limited uptake of FDG in the brown fat of the test animals. ^{18}F FDG was injected iv and the mice were immediately anesthetized with 3% isoflurane gas in a warmed chamber. After a 15 min uptake period, mice were sacrificed by isoflurane overdose. All subsequent images were acquired postmortem.

A standard procedure for cell growth, harvest and injection was established. Cell lines were received from Dr. Tigyi in the mail as viable cultures with the exception of B16F10 EV which was sent frozen. Cells were grown to ~80% confluency and samples were frozen in storage medium containing DMSO. For experiments, cells were recovered from frozen stocks, grown to 80% confluency and then released from the culture dish by trypsin treatment. Briefly, media was aspirated from the cells and they were washed once with sterile PBS. One mL of trypsin solution was added, the excess aspirated and the 100 mm dish put at 37° C for 5 min. The cells were then resuspended in 10 mL of growth medium containing FBS and a sample was taken for counting using a hemocytometer. The remainder of the cells were centrifuged at 1000× g for 5 min and then were suspended in PBS at a concentration of $6\text{--}7 \times 10^5$ cells per mL and the tube placed on ice. The usual cell yield was a little less than 10^7 cells per plate. The cells were then counted again and adjusted to the correct concentration by addition of appropriate amounts of PBS.

Female 8-12 week-old C57Bl6 mice were then warmed under a heat lamp and were administered 100 μL of the cell suspension iv from a 1 mL syringe with a 27g needle in a smooth infusion. The injections were completed within 30 min of cells being suspended in PBS. The cells remaining in the tube after injection were again counted on a hemocytometer to verify concentration and viability.

An initial experiment was performed to determine whether B16F10 tumor colonies in the lung could be detected at day 10 or day 14 post-injection. Groups of 4 or 5 mice were injected with either 1×10^4 or 5×10^4 parent B16F10 cells iv, as described above. At either 10 days or 14 days post-injection, animals were imaged using ^{18}F FDG and then density of tumor colonies in the lung analyzed from histologic sections prepared using lung tissue obtained at necropsy. The PET images were all dominated by the significant uptake of the ^{18}F FDG in the myocardium, associated with normal glucose utilization of the heart. Analysis of the microPET images indicated that there was no obvious increase in lung ^{18}F FDG content in animals injected with B16 F10 cells at either dose or at either time point, as compared to normal C57Bl6 mice. Subsequent analyses of histologic sections showed that lung colonies could be detected at day 10 in the mice that had received 5×10^4 cells, but that the colonies were very small (<0.5 mm). Even by day 14, the colonies were very small. At day 10 and day 14, lung colonies were observed in histologic lung sections in only 1 of 4 mice injected with 1×10^4 cells. These data indicated that PET imaging of lung tumors could only be achieved at time points later than 14 days post injections (e.g. 21 days) and furthermore that the significant uptake of FDG in the heart would undoubtedly compromise our ability to quantify tumor burden in the lungs using this technique.

To determine the contribution of ^{18}F FDG uptake in the lung, normal C57Bl/6 mice were injected with ^{18}F FDG and PET images acquired 15 min post injection. The animals were then

sacrificed, the lungs inflated with 0.6 mL of Bouin's solution instilled through a 20G tracheal catheter, the heart lung block excised, the heart dissected away and PET images of the fixed lungs acquired ex vivo. A comparison of the ^{18}F FDG content of lungs imaged in situ and ex vivo was made by quantifying the radioactivity in a region of interest encompassing the lung tissue in both images. After decay correction, there was appeared to be 10-fold more ^{18}F FDG in the lungs imaged in vivo as compared to lungs imaged in isolation. This indicated that the activity observed in lung region of interest was influenced dramatically by “shine” from ^{18}F FDG uptake in other organs-particularly, but not limited to the heart. This complication persisted even when conservative segmentation of the lung distal from the heart was done. We concluded that detection of B16F10 tumor burden in lungs by in vivo PET scanning with ^{18}F FDG would be significantly compromised by the high background associated with normal ^{18}F FDG distribution in the heart and other organs spilling into the lung volume.

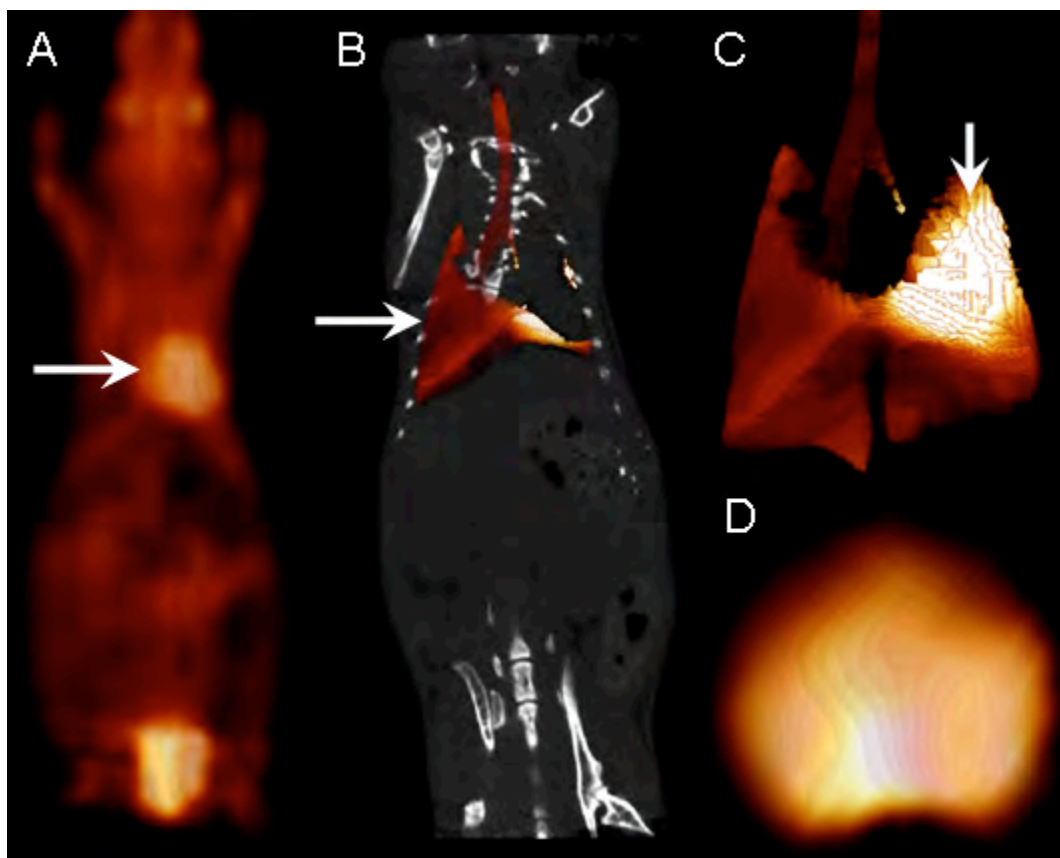


Figure 5. Quantification of pulmonary ^{18}F FDG uptake in mice is complicated by “shine” from the heart and other organs. A) PET image of mouse indicating the myocardial uptake of tracer (arrow). B) 3D segmentation of the lung tissue was performed using the microCT images (arrow) and used to generate a pulmonary region of interest [ROI]. C) Image of PET activity associated with the pulmonary ROI – the shine from the heart is evidenced by the “hot spot” in one lobe (arrow). D) PET image of inflated lungs from the same mouse excised at necropsy - image were data acquired ex vivo and the ^{18}F FDG activity appeared to be uniform and significantly different as compared to the images of the lung acquired in situ.

4. Gene therapy of Cancers using PET-CT Monitoring

SOW Gene therapy of Cancers using PET-CT Monitoring

1. Gene therapy of B16 melanoma using ATX shRNA and DN-STAT3 containing lentivirus in C57-BL6 mice monitored by micro-PET/CT.
2. Gene therapy of B16 melanoma using coinjection of ATX shRNA and DN-STAT3 containing lentiviruses in C57-BL6 mice monitored by micro-PET/CT.
3. Gene therapy of B16 melanoma using lentivirus containing tandem ATX shRNA and DN-STAT3 insert in C57-BL6 mice monitored by micro-PET/CT

4.1 Gene therapy of B16 melanoma using ATX shRNA and DN-STAT3-containing lentivirus in C57Bl/6 mice monitored by microPET/CT

Either normal C57Bl/6 mice or mice injected with 5×10^4 cells iv with 5 different cell lines (B16F10 parent; B16F10 B1; B16F10 SC; B16F10 STAT3 or B16F10 EV) were analyzed for lung colonies and scanned with FDG PET/CT. For scanning day 21 post cell injection, mice were injected iv with 600-1500 μCi of ^{18}F FDG in 200 μL of PBS and then placed in 3% isoflurane in a warmed container for 15 min to allow for uptake. Six mice were injected with each cell line and 7 normal mice were analyzed in parallel. The animals were then sacrificed by exposure for 3 min to a lethal dose of isoflurane and the lungs were inflated with 0.6 mL of Bouins solution delivered through a 20G tracheal catheter and the trachea was then tied off with suture and the heart/lung block carefully excised and suspended, submerged, in Bouins solution. After 30 min, the heart, thymus and any other extraneous material was removed and the ^{18}F FDG radioactivity associated with the fixed lung counted (time noted) in a CAPINTEC dose calibrator before microPET images were acquired using a P4 microPET scanner. After images were acquired, the radioactivity in the whole samples was measured in a gamma scintillation counter, and digital pictures of the fixed lungs were taken to document the surface tumor density and gross pathological features. Individual lobes of the fixed lung were inspected for colonies and then prepared for paraffin sectioning. Single 6- μm thick sections of all lung lobes, stained with hematoxylin and eosin were examined microscopically and tumor colonies counted. Lung radioactivity determined either in the CAPINTEC or the gamma scintillation counter was corrected for F-18 decay to the time of injection of the original dose.

PET/CT scanning:

It was determined in pilot experiments reported earlier that the high activity of the heart and accessory tissue in the heart-lung block dominated the activity in the lungs even when animals had relatively high tumor burden. For this reason, the protocol described above was adopted to assess whether individual pulmonary tumor colonies could be imaged and further, to test our hypothesis that the total lung burden of ^{18}F FDG correlated positively and linearly with tumor burden as assessed by manual colony counting. In certain groups of animals there was a weak correlation between residual pulmonary radioactivity at 30 min post-injection and the number of colonies observed manually; however, this did not hold true for all cell groups and was not considered a suitable way to measure tumor burden (Fig. 6). Selected PET images of high tumor burden lung (Fig 7) showed slightly enhanced lung images when compared with normal control animals; however, the individual tumors could not be resolved. This is not surprising since the tumors range in size from pinpoint to about 2 mm in diameter. The resolution of the P4 microPET instrument is about 2 mm under optimal conditions of boundaries and high radioactivity.

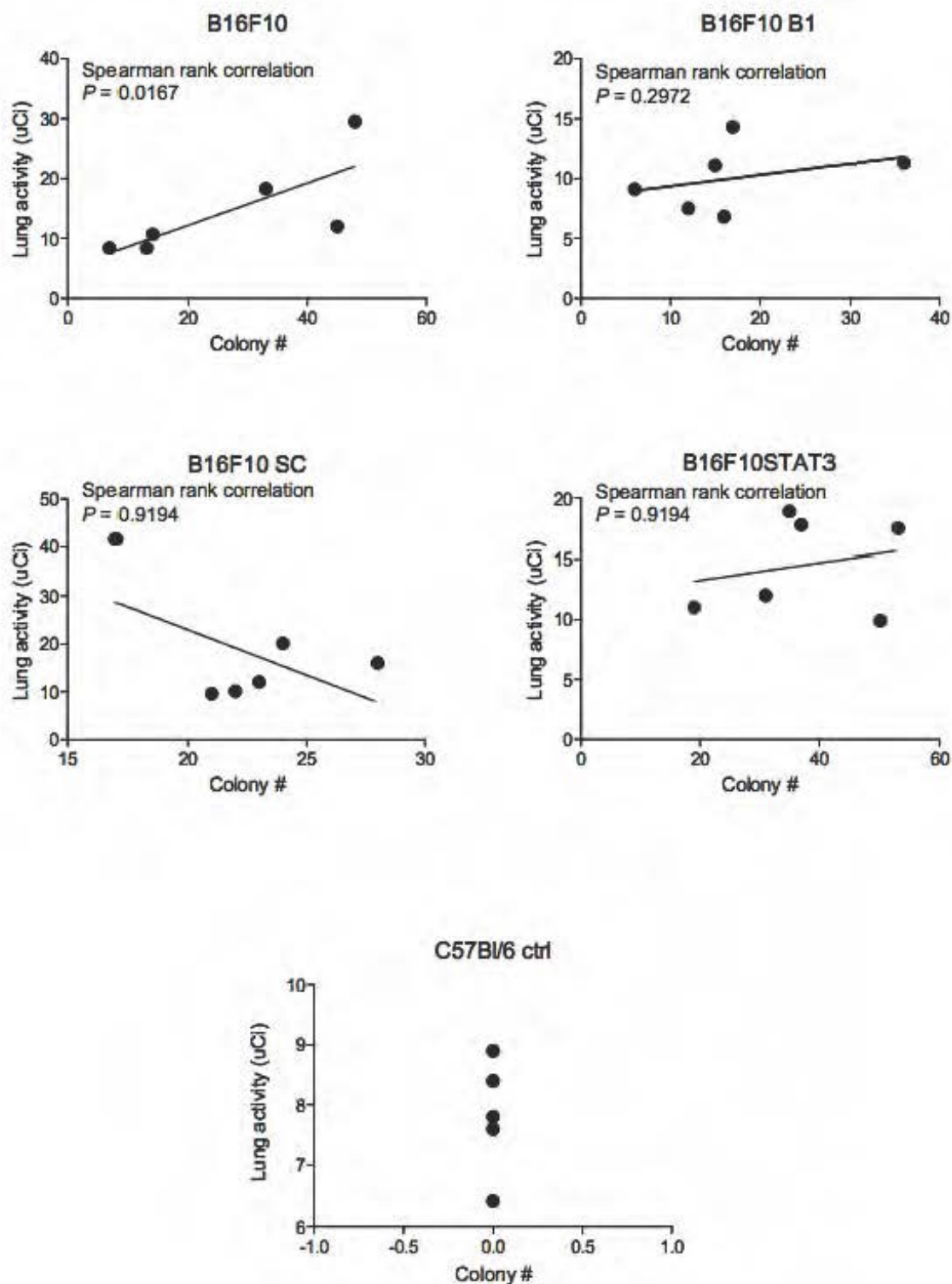


Figure 6. Correlation analysis of pulmonary tumor colony number with the ^{18}F FDG-associated radioactivity in excised mouse lungs. A positive and significant correlation ($P < 0.025$) was observed only for the mice injected with parental B16F10 cells

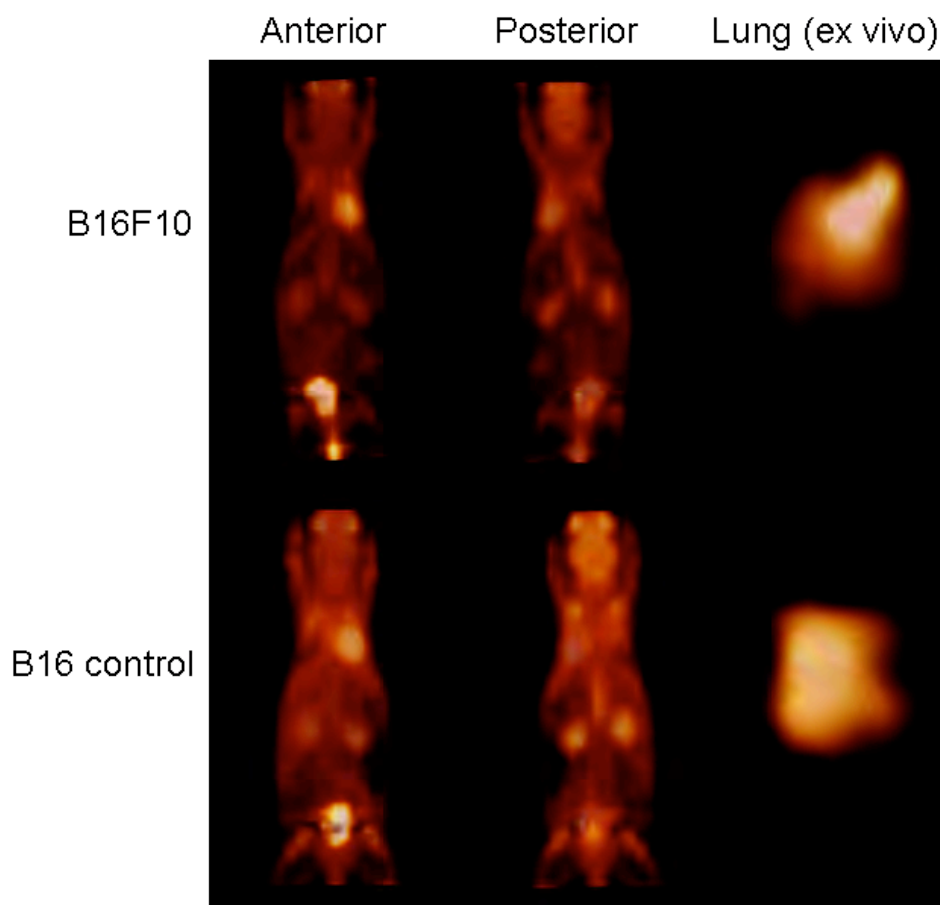


Figure 7. Example of microPET images of lungs in situ and ex vivo from mice with high (B16F10) and no (B16 control) lung-tumor burden. The B16F10 mouse had 14 colonies counted grossly, 4 colonies found histologically. It retained 10.7 μCi from a total of 991 μCi injected ($\sim 1\%$ of the decay-corrected injected dose). No colonies were observed either grossly or histologically in the control mouse, which retained approximately the same % injected dose in the lungs.

5. Tumor colony counting

Tumors were counted from gross examination of fixed lung (see Fig. 8) separated lobes or from single slice histology slides crossing the major cross sections of embedded lung lobes for several different experiments (Fig. 9). The gross colony counts varied significantly from animal to animal within a group. The colony range was nearly as great as the range for all experimental groups of animals resulting in very large standard deviations from the average. Furthermore, colony size varied dramatically as mentioned above. In some instances, particularly with the STAT3 cells, both white and black colonies were observed indicating that some tumors had lost melanin expression for unknown reasons (Fig. 10). Colony counts from histology slides also varied widely with a poor correlation of these numbers with numbers collected from gross colony counting. These variations resulted in average colony counts per experimental animal group that were not statistically different from each other. Neither the colony count nor the residual FDG in the lungs gave a reliable method of quantitation of lung tumor burden.

		COLONIES		
B16F10 (3/9/09)	Injected Dose (μ Ci)	Gross	Histology	Recovered lung activity (μ Ci; γ counter)
1	991	13	4	8.4
2	1290	33	13	18.3
3	1072	7	3	8.4
4	1080	45	15	12
5	1000	48	20	29.5
6	1188	14	4	10.7
B16F10 B1 (3/9/09)				
1	1040	17	10	14.3
2	1090	16	3	6.8
3	1280	6	4	9.1
4	1281	15	9	11.1
5	1296	12	8	7.5
6	1439	36	7	11.3
B16F10 SC (3/9/09)				
1	1170	23	4	12
2	1220	17	14	41.6
3	1570	24	11	20.1
4	1270	21	5	9.6
5	1120	22	6	10.1
6	1170	28	9	16
B16F10 STAT3 (3/10/09)				
1	990	19	7	11
2	1110	50	14	9.9
3	960	53	26	17.5
4	1060	31	11	12
5	1200	37	16	17.8
6	1350	35	13	18.9
C57Bl/6 normal 3/10/09				
1	1360	0	0	8.9
2	1470	0	0	7.6
3	1200	0	0	7.8
4	1200	0	0	8.4
5	1140	0	0	6.4
C57Bl/6 EV 3/25/09				(from dose calibrator)
1	720	9	1	4
2	750	27	9	6

3	600	9	12	4
4	620	7	2	4
5	850	9	12	6
6	870	33	7	6
C57Bl/6 normal 3/25/09				
1	870	0	0	3
2	850	0	0	4

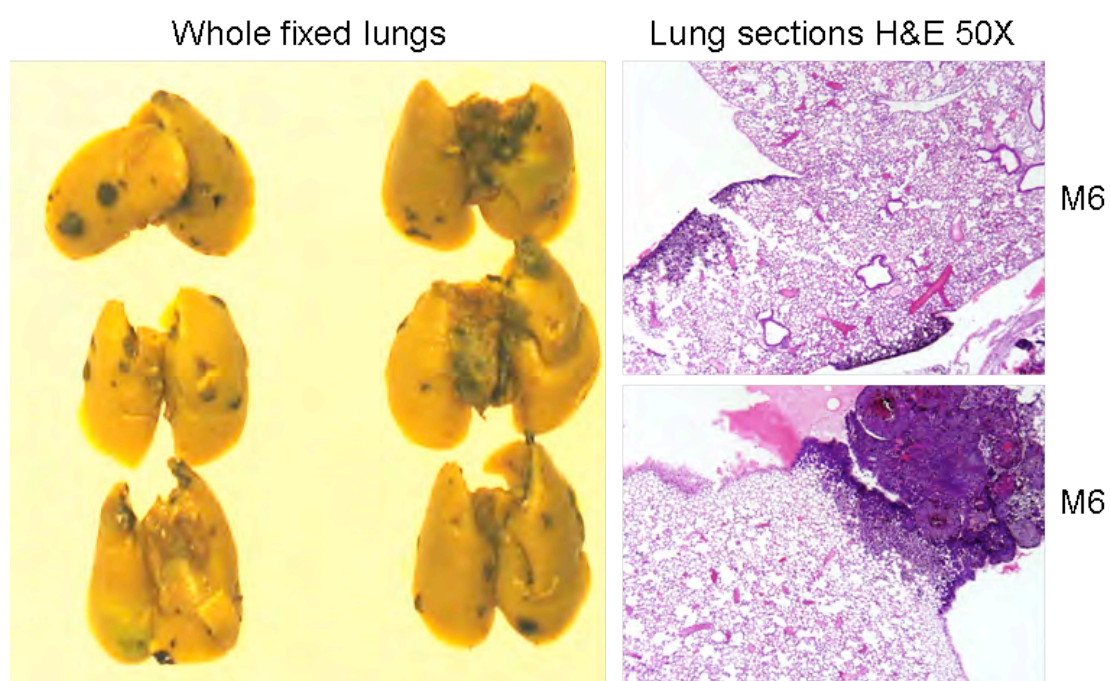


Figure (8).

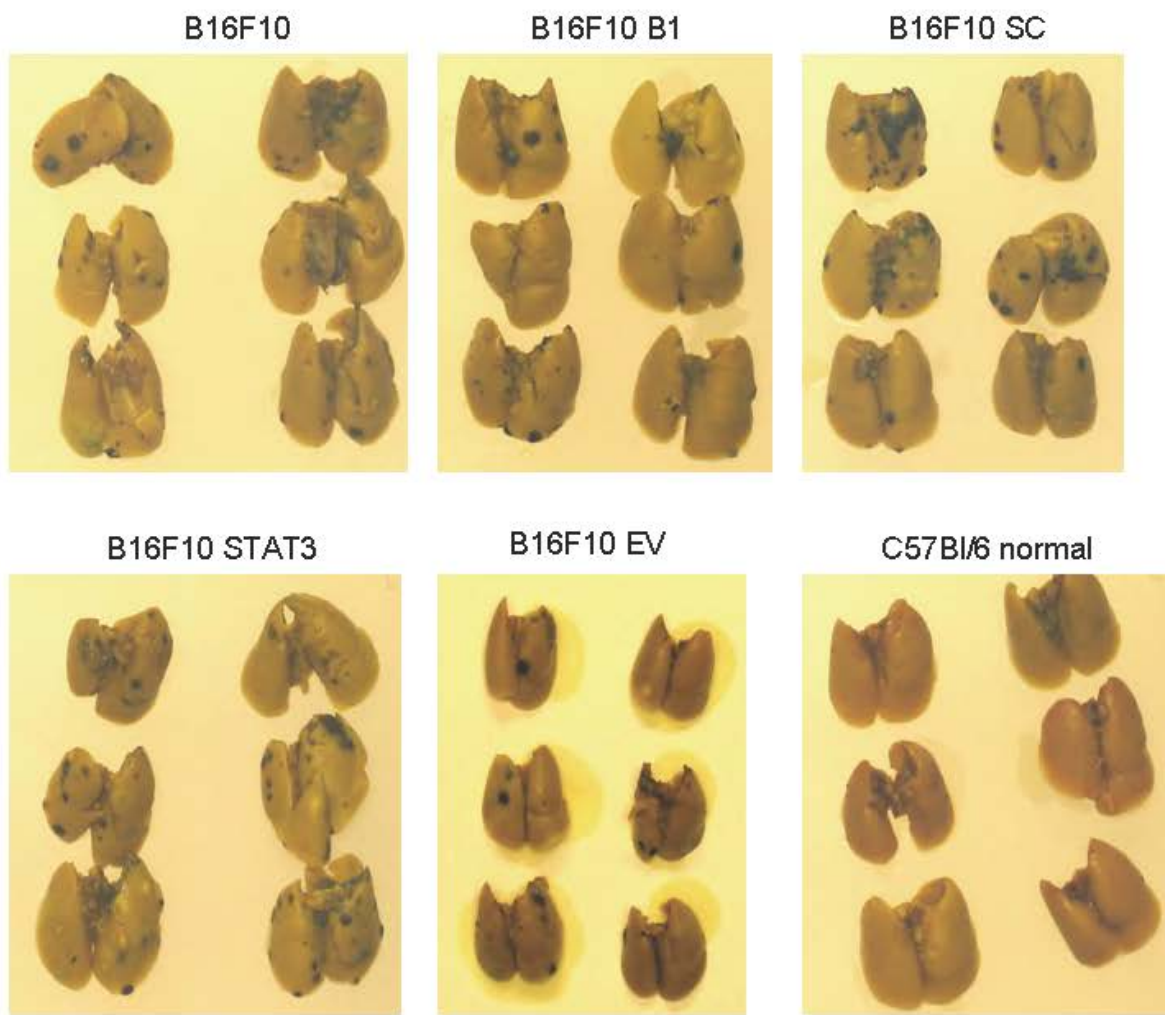


Figure 9.

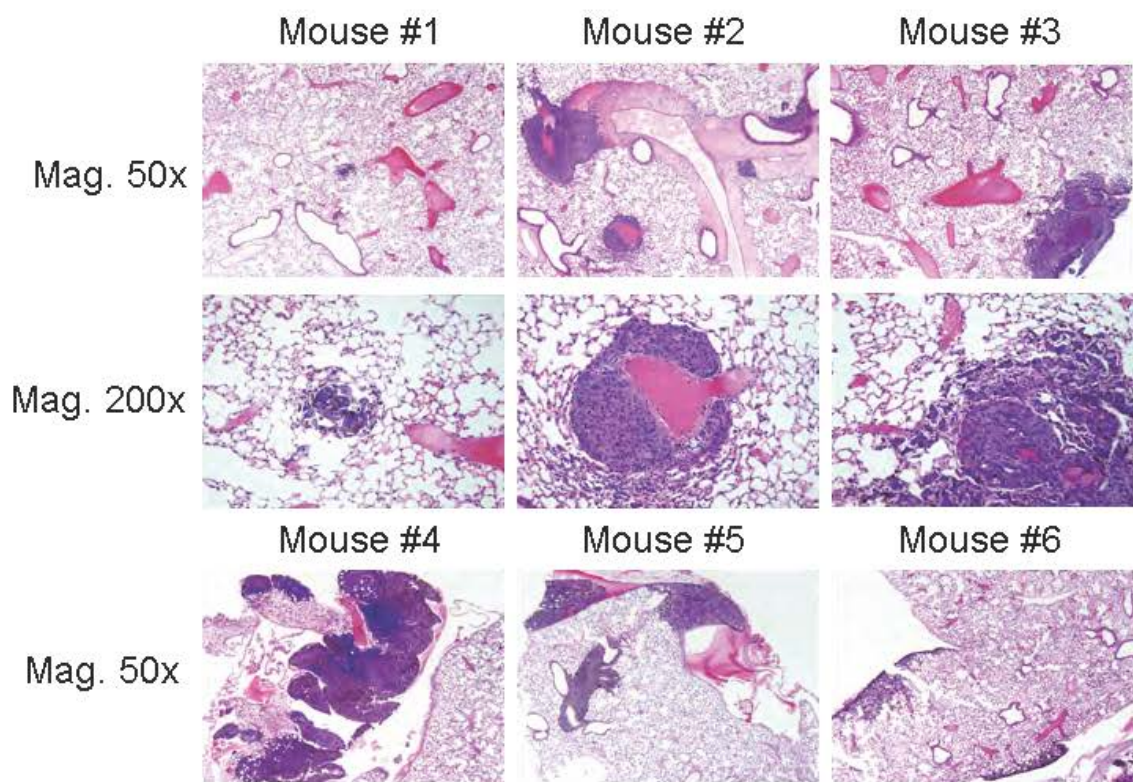


Figure 10.

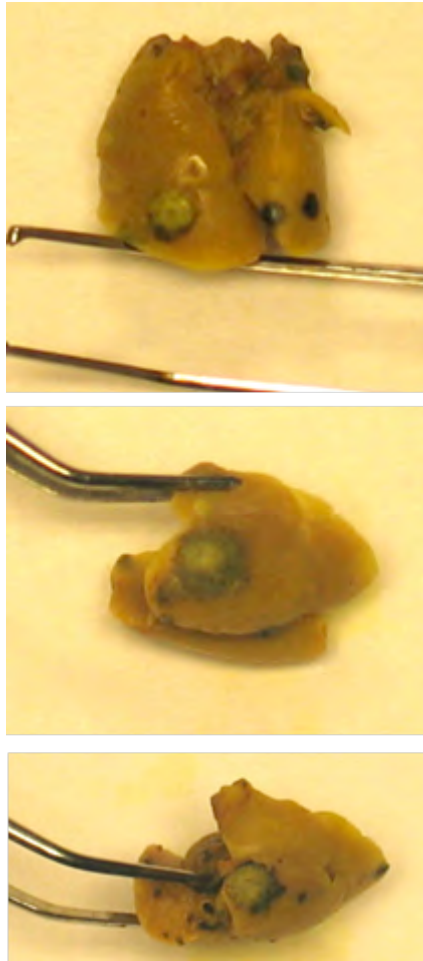


Figure 11.

OBJECTIVE 2. SET UP OF THE VIRAL VECTOR CORE FACILITY (VVC) FOR THE GENERATION OF INVESTIGATIONAL TOOLS FOR ANTICANCER THERAPIES AT UT HEALTH SCIENCE CENTER MEMPHIS (UTHSC).

SOW Viral Vector Core (VVC)

1. Set up core and obtain regulatory approvals
 2. Construction of vectors with ATX shRNA and DN-STAT3 inserts
 3. Construction of replication defective Adenovirus with fiber modifications
 4. Production of lentiviral vectors with ATX shRNA and DN-STAT3
 5. Production of fiber modified replication defective Adenovirus
 6. Construction of a tandem vector with both ATX shRNA and DN-STAT3 inserts
 7. Production of tandem ATX shRNA and DN-STAT3 vectors
 9. Production of conditionally replicating oncolytic adenovirus vectors
- 2.1. Set up core and obtain regulatory approvals.

The VVC was conceived as a critical partnership between UTHSC investigators and experienced virologists and viral vector production staff for the purpose of producing quality-controlled stocks of viral vectors as investigational tools for cancer research and as novel anti-cancer therapeutics. In addition to production of viral vectors, the VVC would provide critical services to UTHSC cancer researchers that would enable them to use the viral vectors. These enabling services included assisting in selecting the appropriate viral vector system, planning the plasmid constructions for vector production, providing methods for transduction of cells *in vitro* and *in vivo*, performing quality control of vector productions (titration of vectors and testing for replication competent recombinants in the case of lentiviral vectors and replication defective adenoviral vectors) and training personnel in investigator's laboratories in the safe use of viral vectors.

Infrastructure of VVC completed. The UTHSC administration assigned the VVC core laboratory three rooms (276, 278 and 279) in the new Cancer Research Building (formerly the Basic Science Building) at 19 Manassas Street on campus. Room 279 is a 500 sq ft wet bench laboratory and Rooms 276 and 278 are adjacent BSL2 cell culture rooms across the hall from the wet bench laboratory. In addition, an 80 sq ft office nearby was also assigned to the VVC. Dr. Albritton participated in the final stages of architectural planning for the Cancer Research Building and designed this suite of rooms specifically to accommodate a viral vector core facility. We set up the BSL1 wet bench lab in room 279 for construction of lentiviral and adenoviral vectors using standard molecular biology techniques. This wet bench lab has been fully functional since September, 2007. We furnished it with a thermal cycling machine for PCR, three gel electrophoresis units, two electrophoresis power supplies, two table-top microcentrifuges, a microwave oven, two heat blocks, a pH meter, a water bath, a -20 °C freezer, a refrigerator, vortex, two sets of pipetman, a shaking water bath, and a 37 °C incubator.

In rooms 276 and 278, we established the BSL2 level tissue culture facilities for production of viral vectors. Both rooms have been fully functional since September 2007. Room 278 does not have direct access to the common hallway; access is through room 276. Taking advantage of this physical arrangement we set up two biosafety cabinets in the inner room 278, one for use in lentiviral vector production and the other for adenoviral vector production. This room also contains a refrigerated low speed table-top centrifuge with seal rotor buckets, an inverted phase light microscope and two stacked CO₂ incubators (one for lentivirus producing cultures and one for adenovirus producing cultures). The outer room 276 was set up for maintaining cell lines and adeno-associated viral vector production. It contains a biosafety cabinet and an ultracentrifuge. In the common equipment room 204, we have a -80 °C freezer and one cell storage unit.

Personnel hired. We hired three people to staff the vector core facility. The first individual hired was Junming Yue, Ph.D. as Director of the core facility in charge of the daily operation of this core laboratory. Dr. Albritton is Scientific Director of the core. Dr. Yue was previously a managing director of a viral vector core at the University of Pittsburgh specializing in lentiviral vector production. The second individual hired was a senior research assistant Axia Ren, Ph.D., and the third a research assistant Sravya Penmatsa, B.S. Dr. Ren's expertise is in adenoviral vector construction and production. Ms. Penmatsa is experienced in molecular biology and cell culture techniques. Dr. Yue supervised Dr. Ren and Ms. Penmatsa on a daily basis and Dr. Albritton met with the staff once weekly to review progress and plans.

Regulatory approvals obtained. The VVC laboratory applied for registrations of lentiviral and adenoviral vector construction and production. Dr. Albritton worked with Ms. Francine Rogers, the university Biosafety Officer (BSO), to develop a plan that gives flexibility to vector core for large numbers of productions and at the same time provides scrutiny of the individual viral genome constructs and their intended use. The Institutional Biosafety Committee (IBC) of the UTHSC approved a three year registration to construct and produce lentiviral vectors and a separate three year registration to construct and produce adenoviral vectors. The order form for requesting viral vectors from the VVC contains a section that requests the faculty investigator provide the approval date and registration number for registration to possess and use the viral vector, and if vectors will be used in animals then the date of approval and protocol number from the Institutional Animal Care and Use Committee (IACUC). Immediately after a completed order form is received, it is forwarded to the BSO for her signature verifying that the IBC and IACUC approvals are current and cover the use of that viral vector. The BSO returned the signed vector request form to Dr. Yue at the VVC and then he schedules the construction and production of the vector order. In cases where the faculty investigator leaves this section blank or states that no current registration is available, Dr. Yue contacts the faculty to offer assistance in the

preparation of regulatory approvals and works with the BSO to help the faculty in their preparation.

Advertising the VVC services to the UTHSC research community. The new core facility was introduced to faculty and research staff in three phases. In the initial phase Dr. Yue discussed the core and its services with individual faculty identified by Drs. Tigyi, Pfeffer and Albritton as potential clients for the core facility. The second phase broadened our outreach to include all faculty and researchers at UTHSC. Drs. Yue and Albritton gave departmental seminars describing the vector core, its location, and the services it provides as well as giving a brief introduction to each of the vector types and presenting data obtained using viral vectors constructed and produced at the new UTHSC core facility. Dr. Yue posted on bulletin boards throughout the campus a one page flyer announcing the vector core services and Dr. Albritton wrote an article for the monthly university research newsletter *Research Notes*. In the third phase Drs. Albritton and Yue designed webpages for the vector core and these were posted with links to the webpages on the university Clinical & Translational Science Institute (CTSI) webpages at <https://ctsi.utmem.edu/viralvector/index.php> and the Research Administration webpages at http://www.utmem.edu/research/research_resources/viral_vector/index.php. The order request form is available as a download from these vector core webpages. In addition to services provided the webpages include contact information and the location of the core facility.

Services provided by the VVC to faculty investigators at UTHSC during the funding period of May 1, 2007 to April 30, 2009. The vector core exceeded its milestones in extending services to UTHSC faculty. As the core facility staff completed construction and production of the sets of viral vectors committed to the research investigations of the anti-tumor activity of anti-autotaxin silencing RNA and the dominant negative STAT3, the core facility began providing services to faculty investigators throughout the UTHSC. While we had planned to begin providing these services in the last months of the funding period, progress in setting up the vector core and producing vectors for the B16 melanoma studies was more rapid than we anticipated and we were able to open the core to services by faculty much sooner than planned. Lentiviral vectors became available beginning in April 2008 and adenoviral vectors beginning in September 2008. The core also began providing Letters of Support for faculty grant applications, biosafety training for use of viral vectors and assistance in experimental design and regulatory approval for vector use in June 2008. The services are available to faculty on the three medical campuses of UTHSC located in Memphis, Knoxville and Chattanooga, TN. Table 1 shows the UTHSC faculty clients served including those services planned in the funded application. Specific services provided to these clients are listed in Table 2. Table 3 lists services by investigator and vector type and Table 4 lists the services for preparation of grant applications.

In addition to providing core services to the faculty, Dr. Albritton designed and Dr. Yue constructed two specialized lentiviral vectors that are now available as valuable investigational tools for cancer researchers at UTHSC. Both new vectors use state-of-the-art technology in which a short sequence encodes a copy of the 2a “self-cleaving” or “ribosome skip” peptide from a picornavirus. The first vector was LV-X-2a-EGFP, a lentiviral vector into which any gene of interest can be inserted in front of enhanced green fluorescent protein (EGFP) with the 2a peptide in between so that the two proteins express as separate molecules in stoichiometric amounts. Tumor cells expressing this vector can be visualized in in vitro experiments using fluorescence. The second new vector resource LV-Luc2-2a-mKate2 expresses two reporter genes: a Luc2, the latest most powerful version of the firefly luciferase gene; and mKate2, a far-red shifted fluorescent protein separated by the 2a peptide. The resulting Luc2-2a-mKate2 fusion gene expresses both reporter genes in stoichiometric quantities. Tumor lines infected by this new lentiviral vector can be transplanted into mouse models and the implanted cells detected by live whole body imaging in the IVIS Xenogen system currently operational in the first floor of the Cancer Research Building. The imaging system detects luciferase by chemiluminescence and mKate2 by fluorescence. mKate2 is particularly powerful addition for cancer researchers since its excitation and emission wavelengths are not absorbed well by hemoglobin in the mice.

Table 1. Faculty clients served by the Viral Vector Core.		
College	Department	Number of faculty clients
College of Medicine	Department of Anatomy and Neurobiology	1
College of Medicine	Department of Medicine	2
College of Medicine	Department of Molecular Sciences	2
College of Medicine	Department of Pathology	4
College of Medicine	Department of Pharmacology	2
College of Medicine	Department of Physiology	2
Total Clients		13

Table 2. Services provided to UTHSC faculty.	
Type of Service	Quantity
Production of quality-controlled stocks of viral vectors.	28
Standardized RCL assays for replication-competent lentivirus.	5
Assistance in grant application with experimental design section.	7
Letters of Support for grant applications.	9

Table 3. April 1, 2008 – April 30, 2009. Viral vector production services provided to UTHSC faculty.		
DEPARTMENT	FACULTY	NUMBER of LENTIVIRAL VECTORS
Anatomy and Neurobiology	Thomas Schikorski	1
Medicine	Lisa Jennings	2
Medicine	Bo Tang	2
Molecular Sciences	Tony Marion	1
Molecular Sciences	Lorraine Albritton	2
Pathology	Yi Lu	1
Pathology	Larry Pfeffer	6
Pathology	Tiffany Seagroves	1
Pathology	Andrzej Slominski	1
Pharmacology	K. U. Malik	1
Pharmacology	Ed Parks	1
Physiology	A. P. Naren & Leonard Johnson	1
Physiology	Gabor Tigyi	7
Viral Vector Core Resource	(LV-Luc2-2a-mKate2 and LV-X-2a-EGFP)	2

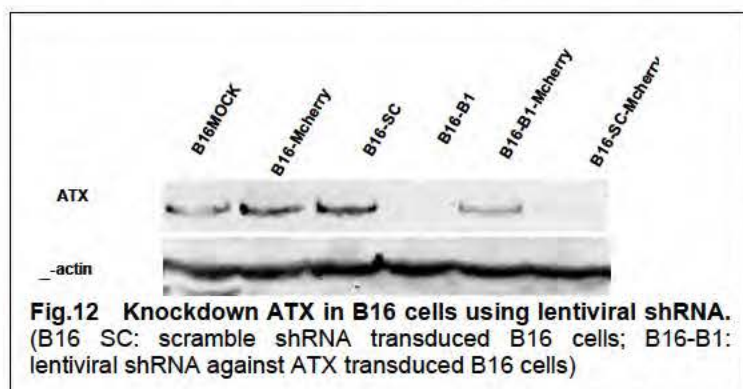
Table 4. April 1, 2008 – April 30, 2009. Grant application services provided by VVC to UTHSC faculty:				
DEPARTMENT	FACULTY	TYPE OF SERVICE		STATUS
Medicine	Lisa Jennings	Experiment design & use of lentiviral vectors.	Letter of Support	Pending
Pediatrics	Russell Chesney & Xiaobin Han	Experiment design & use of lentiviral vectors.	Letter of Support	Resubmit
Pathology	Andrzej Slominski	Experiment design for lentiviral vector.	Letter of Support	Pending
Pathology	Lawrence Pfeffer	Experiment design for lentiviral vector.	Letter of Support	In Prep
Pathology	Yi Lu	Experiment design for lentiviral vector.	Letter of Support	Not Funded
Pharmacology	K. U. Malik	Experiment design for lentiviral vector for two separate grant applications.	Letters of Support (2)	1 Funded & 1 in prep
Physiology	Gabor Tigyi	Experiment design & use of lentiviral vectors.	Letter of Support	Funded
Pharmaceutical Sciences (Pharmacy)	John Buolamwini	Experiment design for lentiviral vector.	Letter of Support	Pending

Cost recovery plan for long term maintenance of the VVC. The original long term plan for maintaining operation of the VVC was to be through cost sharing by a core set of six to eight cancer investigators who would each budget 10-20% of the Director's salary, 25-50% of a Research Associate's salary and 50% of a Technician's salary on their five year grant awards. However, we discovered that there was a much larger base of faculty whose research would benefit from the core facility services and in order to serve them effectively we adapted a cost recovery schedule, that is a fee for service schedule. This was possible primarily because Dr. Yue obtained a set of lentiviral vector plasmids and genome that was not covered by a restrictive Materials Transfer Agreement and so could be propagated and cost recovered for vector construction using these plasmids.

Projected long term use of the Viral Vector Core Facility. On May 1, 2009 the core facility moved to the cost recovery system. A total of 25 clients signed a list of faculty who will order services from the core for the university's fiscal year July 1, 2009 to June 30, 2010. This almost doubles the number of faculty clients that will be served by the core facility and we expect to continue to grow our client numbers as grant applications submitted with Letters of Support from the core are funded and the work begins. The breadth of faculty using the core facility will also expand next year and importantly will bring our first faculty from the Veterans Administration Medical Center adjacent to the UTHSC campus in Memphis, TN. Table 5 lists the number of colleges and departments served that will be served.

Table 5. Projected faculty clients fiscal year July 1, 2009 – June 30, 2010.		
College	Department	Number of faculty clients
College of Medicine	Department of Anatomy and Neurobiology	1
College of Medicine	Department of Medicine	1
College of Medicine	Department of Molecular Sciences	1
College of Medicine	Department of Pathology	6
College of Medicine	Department of Pharmacology	5
College of Pharmacy	Department of Pharmaceutical Sciences	1
College of Dentistry	Dental Research Center	1
VA Medical Center		1
College of Medicine	Department of Physiology	8
Total Projected Clients		25

2.2. Lentiviral Vector system (SOW 2-7)

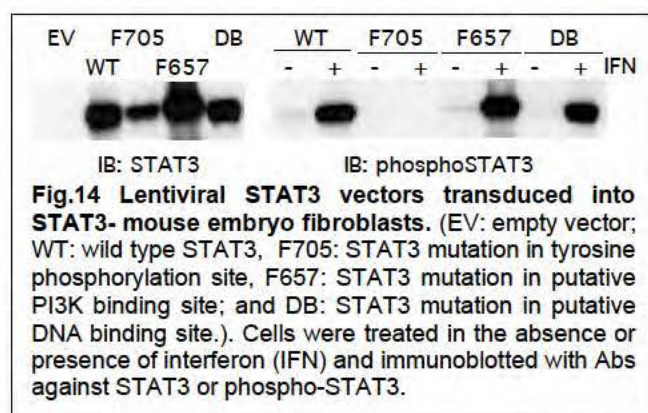
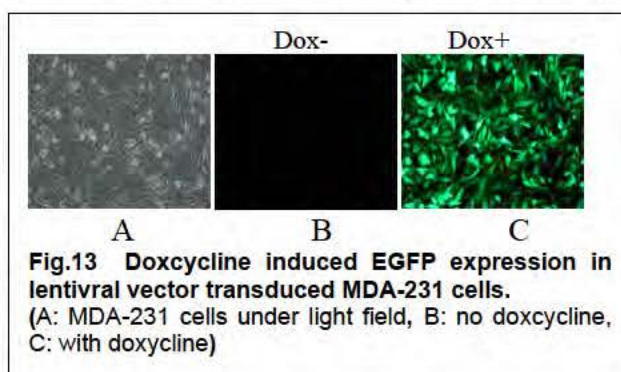


(Fig.12). The miRNA mediated ATX knockdown vector has also been generated. In an initial test we observed dramatic knockdown of ATX expression.

In addition, we have constructed EGFP, lysophosphatic acid (LPA) and four more mutant lentiviral vectors. The stable expression cell lines have been established using these vectors. The EGFP lentiviral vector has been used to transduce several different cell lines, such as mouse fibroblasts, rat intestinal epithelial cells, rat smooth muscle cells, which resulted in transduction efficiency of more than 95% in all cell lines examined.

We also constructed a doxycycline induced lentiviral vector system, which showed no background leakiness. We tested this system in MDA-231 cells using EGFP reporter gene, which a robust EGFP expression was induced with the doxycycline at a concentration of 1ug/ml (Fig.13).

As proposed in this grant, The VVC has constructed a STAT3, a dominant-negative STAT3 (DN-STAT3), as well as two additional mutant STAT3 lentiviral vectors. All four mutant STAT3 constructs have been transduced into mouse fibroblasts with high efficiency (~90%.) By immunoblotting we have determined that transduced cells have high and stable expression of STAT3 (Fig. 14).



3. Adenoviral vector system

The VVC has constructed adenoviral vector systems for gene expression, shRNA-based gene knockdown and doxycycline-inducible gene expression and miRNA-mediated gene knockdown systems.

For gene overexpression and shRNA-mediated gene knockdown, the gene of interest can be subcloned into multiple cloning sites and driven by CMV promoter in a shuttle vector with the adeno-Easy system. The polymerase III

promoter H1 and U6 promoter has been inserted in a shuttle vector and are ready to express shRNA in the proposed studies to knockdown gene expression.

We have also constructed a single adeno-genome vector for doxycycline-inducible expression that the reverse transactivator rtTA3, a third generation production has been inserted in E3 region, and the gene of interest is inserted in E1 region of adenogenome. We have validated the inducibility of this system with a EGFP reporter gene. The replication defective viruses produced can efficiently transduce human HeLa cells (Fig.15) rat smooth muscle cells following the doxycycline treatment.

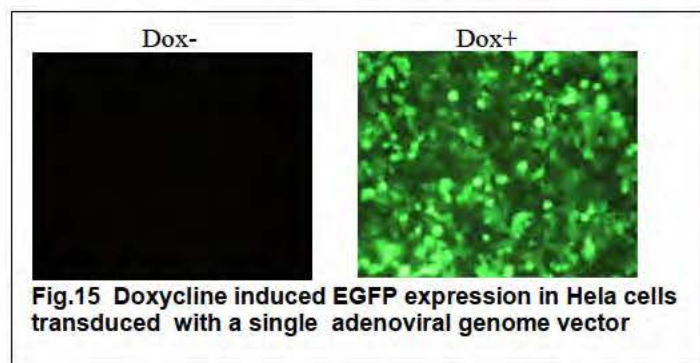


Fig.15 Doxycycline induced EGFP expression in Hela cells transduced with a single adenoviral genome vector

We also established a miR-21 based doxycycline gene knockdown adenoviral vector. We found that this system can efficiently knockdown the expression of an EGFP reporter after induction with doxycycline.

KEY RESEARCH ACCOMPLISHMENTS

1. Microfluidic chemistry core was set up. Two synthetic pathways for the synthesis of 3'-Deoxy-3'-[¹⁸F]fluorothymidine using the NanoTek LF microfluidic synthesizer have been established.
2. Live imaging of C57Bl/6 mice injected with 10⁶ B16/F10 murine melanoma cells using ¹⁸FDG has been accomplished for the first time.
3. Live imaging of genetically modified B16/F10 cells expressing shRNA to ATX, dnSTAT3, or both has been accomplished.
4. The VVC has been established and obtained regulatory approval.
5. The VVC has produced lentiviruses using the sh-RNA to autotaxin and a dominant negative STAT3 constructs.
6. An adenovirus-based doxycycline-inducible gene expression and miRNA-mediated gene knockdown system has been developed.
7. The knockdown of ATX expression by lentivirus-mediated sh-RNA treatments has been validated in vitro and in vivo.
8. Lentiviral delivery and stable expression of STAT3 constructs has been validated in vitro and in vivo.
9. Plans are in place for the long-term operation of the VVC.

REPORTABLE OUTCOMES

Paper:

Shuyu E, Yun-Ju Lai, Ryoko Tsukahara, Chen-Shan Chen, Yuko Fujiwara, Junming Yue, Huazhang Guo, Akio Kihara, Gábor Tigyi and Fang-Tsyr Lin. The LPA₂ Receptor-Mediated Supramolecular Complex Formation Regulates Its Antiapoptotic Signaling (2009) J. Biol. Chem. Mar 17. [Epub ahead of print] – in press

Manuscript submitted:

Aixia Ren, Sravya Penmatsa, Lorraine M. Albritton, Gabor Tigyi, Junming Yue, A tightly regulated single genome Tet-On adenoviral vector. – submitted to Biotechnology Letters

Invention Disclosures:

1. Lentiviral vector mediated antagomiR-21 in cancer and cardiovascular disease gene therapy
2. MicroRNA-21 (miR-21)-based gene knockdown system

CONCLUSION

This award has enabled the creation of critical and formerly non-existing infrastructure for the synthesis of a new PET tracers and the generation of recombinant viruses. In vitro and in vivo proof of principle experiments validated the effectiveness of gene delivery using the viruses. In vivo proof of principle of tumor labeling and PET imaging using 3'-Deoxy-3'-[¹⁸F]fluorodeoxyglucose has been achieved.

LIST OF PERSONNEL

UTHSC – Memphis

Gabor Tigyi, M.D., Ph.D. – PI
Lawrence Pfeffer, Ph.D. – Co-PO
Lorraine Albritton, Ph.D. –Co-PI
Junming Yue, MD, Ph.D. – Investigator
Axia Ren – Research Technician
Sravya Penmatsa – Research Technician

UTHSC – Knoxville

David Townsend, Ph.D. – Co-PO
Jonathan S. Wall, Ph.D. – Investigator
Stephen J. Kennel, Ph.D. – Investigator
Alan Stuckey, Ph.D. – Investigator
Claude Nahmias, M.D. – Investigator
Jay Wimalasena, Ph.D. – Investigator
Claude Nahmias, M.D. – Investigator
Weimin Miao, Ph.D. – Investigator

The Lysophosphatidic Acid 2 Receptor-mediated Supramolecular Complex Formation Regulates Its Antiapoptotic Effect^{*S}

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The G protein-coupled lysophosphatidic acid 2 (LPA₂) receptor elicits prosurvival responses to prevent and rescue cells from apoptosis. However, G protein-coupled signals are not sufficient for the full protective effect of LPA₂. LPA₂ differs from other LPA receptor subtypes in the C-terminal tail, where it contains a zinc finger-binding motif for the interactions with LIM domain-containing TRIP6 and proapoptotic Siva-1, and a PDZ-binding motif through which it complexes with the NHERF2 scaffold protein. In this report, we identify a unique CXXC motif of LPA₂ responsible for the binding to TRIP6 and Siva-1, and demonstrate that disruption of these macromolecular complexes or knockdown of TRIP6 or NHERF2 expression attenuates LPA₂-mediated protection from chemotherapeutic agent-induced apoptosis. In contrast, knockdown of Siva-1 expression enhances this effect. Furthermore, a PDZ-mediated direct interaction between TRIP6 and NHERF2 facilitates their interaction with LPA₂. Together, these results suggest that in addition to G protein-activated signals, the cooperation embedded in the LPA₂-TRIP6-NHERF2 ternary complex provides a novel ligand-dependent signal amplification mechanism that is required for LPA₂-mediated full activation of antiapoptotic signaling.

angiogenesis, and platelet aggregation (1, 2). At least eight G protein-coupled LPA receptors have been identified: LPA₁, LPA₂, and LPA₃ of the endothelial differentiation gene family and the structurally distinct LPA₄/P2Y₉, LPA₅/GPR92, LPA₆/GPR87, LPA₇/P2Y₅, and LPA₈/P2Y₁₀ of the purinergic receptor cluster (3–5). These receptors couple to G_{i/o}, G_{q/11}, G_s, and/or G_{12/13} proteins to activate various signaling pathways. However, the molecular mechanisms underlying the specificity and diversity with which different LPA receptors regulate these wide ranging cellular responses are not yet fully understood.

Substantial evidence has demonstrated that LPA is a survival factor that protects non-transformed cells from different stress-induced apoptosis (6) and renders cancer cells resistance to apoptosis-inducing treatments (1, 2). Among the various G protein-coupled LPA receptors, LPA₂ has been shown to mediate the antiapoptotic effect of LPA *in vivo*. LPA₂^{−/−} mice show significantly increased rates of radiation-induced apoptosis and less crypt survival (7). LPA protects gut epithelial cells from radiation-induced apoptosis in WT and LPA₁^{−/−} mice but not in LPA₂^{−/−} mice (7). The classical paradigm for G protein-coupled receptor (GPCR)-mediated prosurvival signaling involves the coupling of ligand-bound receptors to heterotrimeric G proteins that sequentially activate the downstream effectors involved in Ras/ERK, phosphatidylinositol 3-kinase (PI3K)/AKT, and NF-κB signaling pathways (6). However, recent evidence suggests that non-G protein-coupled signals mediated via the unique C-terminal binding motifs of LPA₂ may be required for its antiapoptotic function. LPA₂ is the only LPA receptor subtype known to interact with various molecules via the unique binding domains present in its C terminus (8). The last four amino acids, DSTL, of LPA₂ bind to several PDZ proteins, including NHERF2 (Na⁺/H⁺ exchanger regulatory factor), PDZ-RhoGEF, LARG (leukemia-associated RhoGEF), and MAGI-3 (membrane-associated guanylate kinase with an inverted domain structure-3) (9–13). These scaffold proteins modulate LPA-induced activation of ERK and/or RhoA. NHERF2 can also regulate phospholipase C-β3 signaling pathways and bridge LPA₂ to cystic fibrosis transmembrane regulator Cl[−] channel (9, 10). Through the PDZ-mediated interactions, membrane-localized NHERF2 and MAGI-3 can recruit the phosphatase and tensin homolog in close proximity to the cell surface to restrict PI3K/

Lysophosphatidic acid (LPA)⁴ is a growth factor-like lysophospholipid abundantly present in biological fluids. It mediates diverse cellular responses important for cell survival, growth, differentiation, migration, inflammation,

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^S The on-line version of this article (available at <http://www.jbc.org>) contains supplemental Figs. S1–S4.

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⁴ The abbreviations used are: LPA, lysophosphatidic acid; GPCR, G protein-coupled receptor; 2-BP, 2-bromopalmitate; ERK, extracellular signal-regulated kinase; PI3K, phosphatidylinositol 3-kinase; WT, wild type; siRNA, small interfering RNA; BSA, bovine serum albumin; DMEM, Dulbecco's modified Eagle's medium; PTX, pertussis toxin; MEF, mouse embryonic fibroblast; DKO, double knock-out; S1P, sphingosine 1-phosphate; GFP, green fluorescent protein.

LPA₂-formed Complexes Regulate Antiapoptosis

AKT activity (14, 15). However, NHERF2 can also serve as a scaffold protein for PDK1 (3-phosphoinositide-dependent protein kinase 1), which plays a central role in the activation of AGC family kinases, including AKT (16). It has been reported that knockdown of NHERF2 attenuates LPA-induced AKT activation in colon cancer cells (12). Thus, the function of NHERF2 in restricting or promoting PI3K/AKT signaling may depend on the relative cellular expression levels of phosphatase and tensin homolog *versus* PDK1.

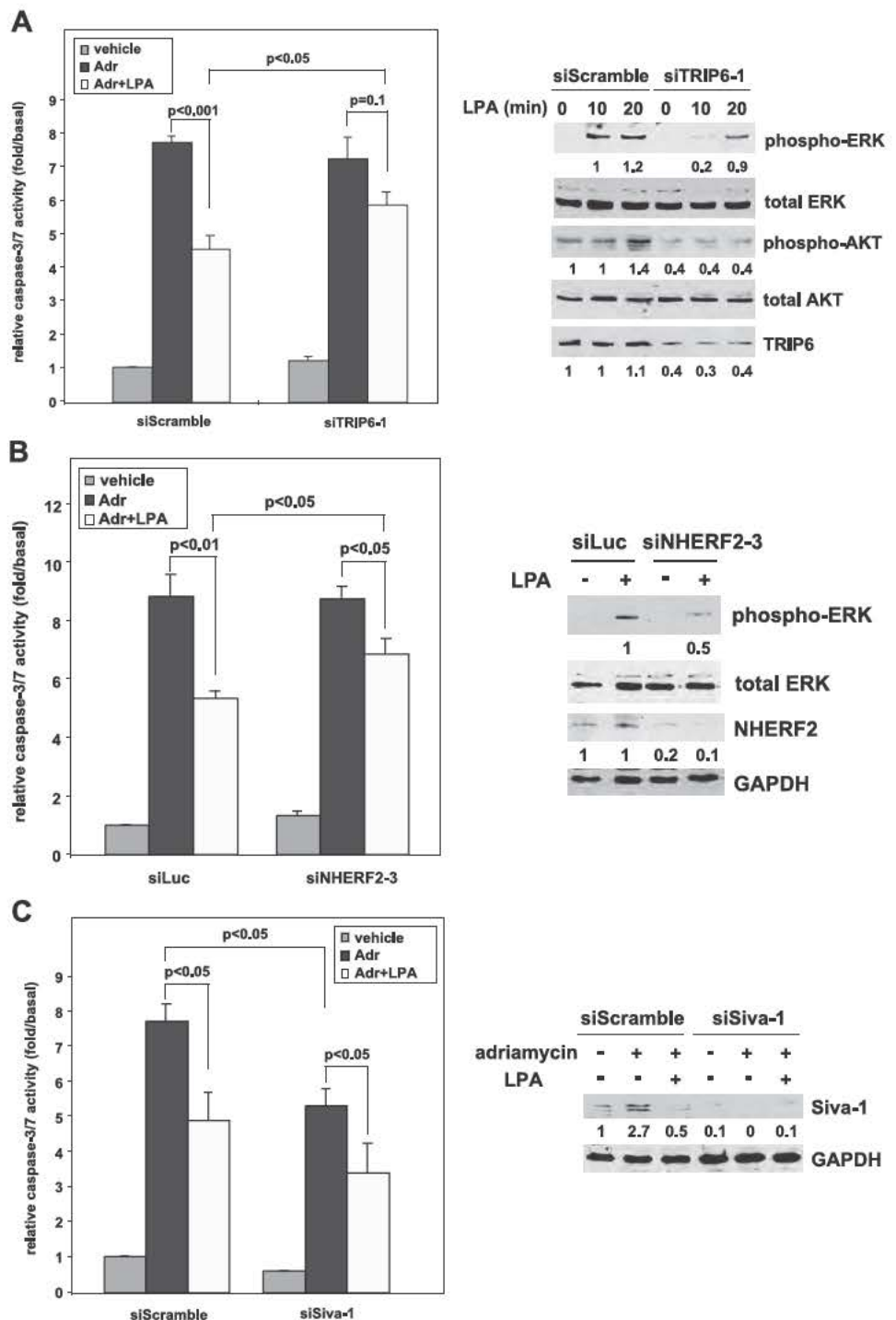
Two zinc finger proteins, including the LIM domain-containing TRIP6 and Siva-1 proapoptotic protein, have been found to bind to the C-terminal tail of LPA₂ (17, 18). The LIM domain is comprised of two zinc finger motifs, which are critical for protein-protein interactions (19). The association of TRIP6 with LPA₂ enhances LPA-induced ERK activation and cell migration in a c-Src-dependent manner (20). However, it is unknown whether TRIP6 plays any role in the LPA₂-mediated antiapoptotic effect. In contrast, Siva-1, a transcriptional target of p53 and E2F1, functions as a proapoptotic protein during DNA damage response (21). The binding of LPA₂ to Siva-1 promotes LPA-dependent ubiquitination and down-regulation of Siva-1 expression (18).

As different LPA receptors show overlapping patterns of G protein coupling, LPA₂-mediated protein-protein interactions may be particularly important in the signal amplification and diversification of this receptor subtype. Here we demonstrate that an LPA-induced ternary complex of TRIP6 NHERF2 and LPA₂ regulates antiapoptotic function. We have mapped the CXXC zinc finger-binding motif of LPA₂ and found the LPA₂-mediated antiapoptotic effect was abolished only when both CXXC- and PDZ-binding motifs were disrupted, indicating that the supramolecular complexes formed via the C-terminal tail of LPA₂ are required for the full antiapoptotic function of LPA₂, and thus play a critical role in the chemoprotective action of LPA in cancer cells.

EXPERIMENTAL PROCEDURES

Plasmid Construction and Site-directed Mutagenesis—The cDNA sequences encoding one of the

deletion mutants or point mutants of FLAG-LPA₂ were amplified by overlapping extension PCR and inserted into pcDNA3.1 (Invitrogen). These cDNA fragments were subsequently subcloned into pcFUV-puro lentiviral vector. The cDNA sequences encoding full-length NHERF2, NHERF-PDZ1 (residues 8–99), or NHERF2-PDZ2 (residues 149–228) were inserted in-frame into pEGFP (Clontech) or pGEX-6P3 (Amersham Biosciences). The full-length TRIP6 cDNA sequences were inserted in-frame into pEBFP-C1. The expression vectors of GST-LPA₂-CT mutants in which Cys-311 and/or Cys-314 were mutated to Ala were constructed by



LPA₂-formed Complexes Regulate Antiapoptosis

QuikChange site-directed mutagenesis (Stratagene) using pGEX-6P1-LPA₂-CT (17) as the template. The pLVTHM (Addgene) lentiviral vector was used to direct the expression of a short hairpin RNA that specifically targets the 19-nucleotide sequences of mouse TRIP6 (siTRIP6-1) (20), human TRIP6 (siTRIP6-2, siTRIP6-3) (17), mouse Siva-1 (18), or human NHERF2 cDNA (siNHERF2-4 (10) and siNHERF2-5, 5'-CCTGCATAGTGACAAGTCC-3'), respectively. The pGIPZ lentiviral expression vector (Openbiosystems) was used to direct the expression of a miR-30-based mouse NHERF2 short hairpin RNA (siNHERF2-3) or a luciferase control short hairpin RNA, which specifically targets the 22-nucleotide sequences of mouse NHERF2 cDNA (5'-ATCAGAGAAGGACAATGAGGAT-3') and luciferase cDNA (5'-CCACTTACGCTGAGTACTTCGA-3'), respectively. pCMV-FLAG-ΔTTDC was constructed by deleting the cDNAs encoding the distal four amino acids, TTDC, of TRIP6 using QuikChange site-directed mutagenesis (Stratagene). All of these cDNA constructs have been verified by DNA sequencing.

Stable Transfection—Primary mouse embryonic fibroblasts (MEF) were isolated from E13.5 LPA_{1/2} DKO embryos and continuously cultured to obtain the spontaneously immortalized MEF cell lines. These MEFs were transduced with an empty lentivirus or the lentivirus harboring WT or one of the FLAG-LPA₂ mutants and selected with puromycin to establish the stable cell lines.

Cellular Co-immunoprecipitation, In Vitro Binding, Immunoblotting, Immunostaining, and LPA-induced Calcium Activation Assay—Experiments and purification of the recombinant Siva-1 and TRIP6 were performed as described previously (7, 17, 18, 20). To detect the interactions of LPA₂, NHERF2, and TRIP6 at physiological levels, SKOV-3 cells expressing a scrambled siRNA, a TRIP6 siRNA, or a NHERF2 siRNA were starved in 0.1% fatty acid-free bovine serum albumin (BSA)-containing DMEM overnight, followed by addition of 2 μM LPA for 10 min and harvested. Endogenous LPA₂ was immunoprecipitated with an anti-LPA₂ rat antibody (a gift from Dr. Junken Aoki) or a control rat IgG. TRIP6 was immunoprecipitated with an anti-TRIP6 mouse monoclonal antibody (BD Biosciences) or a control mouse IgG. Proteins were resolved by SDS-PAGE and subjected to immunoblotting using an antibody specific to NHERF2, LPA₂ (gifts from Dr. A. P. Naren), or TRIP6 (Bethyl Laboratories), respectively.

Palmitoylation of LPA₂—HEK 293T cells expressing WT or one of the point mutants of FLAG-LPA₂ were incubated with [³H]palmitic acid (60 Ci/mmol, Amersham Biosciences) at 37 °C for 2 h. FLAG-LPA₂ in the whole cell lysates was immunoprecipitated with the anti-FLAG M2 monoclonal antibody-conjugated agarose beads, resolved by SDS-PAGE, and detected by autoradiography. The blot was then probed with an anti-FLAG antibody to detect FLAG-LPA₂. The effect of 2-bromopalmitate (2-BP, Sigma) on the inhibition of LPA₂ palmitoylation was determined by pretreating the transfected HEK 293T cells with 100 μM 2-bromopalmitate for 30 min followed by labeling with [³H]palmitic acid.

To determine whether inhibition of palmitoylation affects LPA₂ binding to Siva-1, TRIP6, or NHERF2, HEK 293T cells transiently expressing GFP-Siva-1, GFP-TRIP6, or GFP-NHERF2 with or without FLAG-LPA₂ were pretreated with 100 μM 2-BP in 0.1% fatty acid-free BSA-containing DMEM for 4 h, followed by addition of 2 μM LPA for 10 min. After immunoprecipitation of FLAG-LPA₂, half the precipitates were resolved by SDS-PAGE. Immunoblotting was performed to detect the co-immunoprecipitated GFP-Siva-1, GFP-TRIP6, or GFP-NHERF2. The rest of the samples were subjected to the acyl-biotinyl exchange procedure (22) to determine the levels of palmitoylated LPA₂. Precipitated LPA₂ was pretreated with 50 mM *N*-ethylmaleimide (Pierce) for 1 h, followed by the acyl-biotinyl exchange with 1 M hydroxylamine and 0.2 mM EZ-link biotin-*N*-[6-(biotinamido)hexyl]-3'-(2'-pyridyldithio)propionamide (HPDP) (Pierce) for another hour at room temperature. Biotinylated FLAG-LPA₂ was eluted from the anti-FLAG beads using 100 μg/ml FLAG peptides (Sigma) for competition and subsequently pulled down with avidin beads (Amersham Biosciences). After SDS-PAGE, immunoblotting was performed using an anti-FLAG rabbit polyclonal antibody (Sigma).

Apoptosis Assays—Stable MEFs were starved in 0.1% fatty acid-free BSA-containing DMEM with or without 10 μM LPA for 1 h followed by the addition of 1.5 to 2 μM adriamycin for 7–9 h. Caspase-3/7 activity was determined by cleavage of the luminogenic substrate containing the DEVD sequence (Promega) and was normalized by protein concentrations. To determine the effect of pertussis toxin (PTX) on apoptosis, DKO-LPA₂ MEFs were pretreated with 100 ng/ml PTX overnight before the apoptosis assay. Alternatively,

FIGURE 1. LPA₂-mediated protection from adriamycin-induced apoptosis is regulated by proteins interacting with its C-terminal tail. *A*, knockdown of TRIP6 expression reduces LPA₂-mediated ERK and AKT activation and protection from adriamycin-induced caspase-3/7 activation. LPA_{1/2} DKO MEFs stably expressing FLAG-LPA₂ (DKO-LPA₂) were transduced with the lentivirus harboring a mouse TRIP6 siRNA (siTRIP6-1) or a scrambled control siRNA (siScramble). After starvation for 4 h, cells were treated with 2 μM LPA for 10 or 20 min, and immunoblotting was performed to determine the levels of activated phospho-ERK or phospho-AKT, respectively (right panel). The same blot was reprobed with an antibody specific to ERK, AKT, or TRIP6, respectively. The intensity of each protein was quantified by NIH IMAGE J software and the relative expression of phospho-ERK or phospho-AKT was normalized by the levels of total ERK or AKT. The same cells were starved in 0.1% fatty acid-free BSA-containing DMEM with or without 10 μM LPA for 1 h followed by the addition of 1.7 μM adriamycin for 9 h, and caspase-3/7 activity was determined by cleavage of the luminogenic substrate containing the DEVD sequence and was normalized by protein concentrations (left panel). Data shown are the mean ± S.E. of five independent experiments. Statistic significance (*p* < 0.05) was determined by Student's *t* test. *B*, knockdown of NHERF2 expression attenuates LPA₂-mediated ERK activation and protection from adriamycin-induced apoptosis. DKO-LPA₂ MEFs were transduced with the lentivirus harboring a mouse NHERF2 siRNA (siNHERF2-3) or a luciferase control siRNA (siLuc). The starved cells were treated with LPA for 10 min and the levels of activated ERK, total ERK, NHERF2, and glyceraldehyde-3-phosphate dehydrogenase (GAPDH) in the whole cell lysates were determined by immunoblotting. Adriamycin-induced caspase-3/7 activation were assayed as described in *A*. Data shown are the mean ± S.E. of three independent experiments. *C*, inhibition of Siva-1 expression enhances LPA₂-mediated protection from adriamycin-induced apoptosis. DKO-LPA₂ MEFs were transduced with the lentivirus harboring a Siva-1 siRNA or a scrambled siRNA. The effect of LPA on adriamycin-induced caspase-3/7 activation was determined as described in *A*. Data shown are the mean ± S.E. of three independent experiments. Immunoblotting was performed to detect the expression of Siva-1 and control GAPDH in the whole cell lysates.

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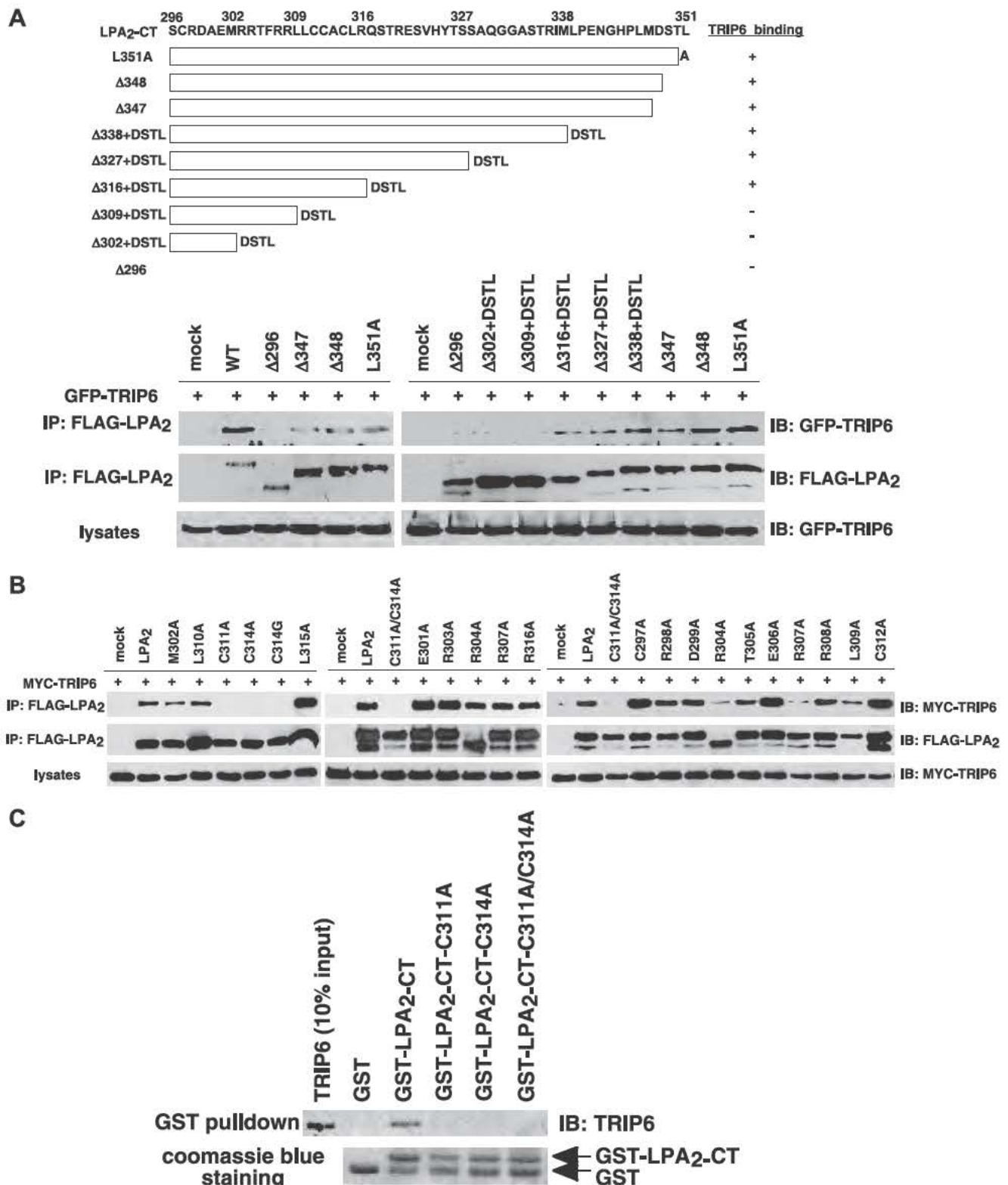


FIGURE 2. The ³¹¹CXXC³¹⁴ motif of LPA₂ is required for the interaction with TRIP6. *A*, the TRIP6-binding motif of LPA₂ is located in the region proximal to Arg-316 of the C-terminal tail. GFP-TRIP6 was expressed in HEK 293T cells with FLAG-LPA₂ or one of the LPA₂ deletion mutants with or without the DSTL sequences as indicated in the top panel. After stimulation of the cells with 2 μM LPA for 10 min, LPA₂ was immunoprecipitated (IP) with anti-FLAG M2 antibody-conjugated agarose beads and resolved by SDS-PAGE. GFP-TRIP6 co-immunoprecipitated with LPA₂ was detected by immunoblotting (IB) using an anti-GFP antibody. *B*, the ability of LPA₂ to bind to TRIP6 is eliminated by mutation of Cys-311 and/or Cys-314 to Ala. MYC-TRIP6 was co-expressed with WT or one of the point mutants of LPA₂ in HEK 293T cells. Co-immunoprecipitation was performed as described above. MYC-TRIP6 co-immunoprecipitated with LPA₂ was detected with an anti-MYC polyclonal antibody. *C*, Cys-311 or Cys-314 of LPA₂ mediates the binding to TRIP6 *in vitro*. Purified recombinant TRIP6 was incubated with glutathione *S*-transferase (GST), GST-LPA₂-CT, or one of the GST-LPA₂-CT mutants at 4 °C for 3 h. TRIP6 pulled down by GST-LPA₂-CT was resolved by SDS-PAGE and detected by immunoblotting using an anti-TRIP6 antibody. The bottom panel shows Coomassie Blue staining of GST and GST-LPA₂-CT proteins. Data shown in each figure are representative of three independent experiments.

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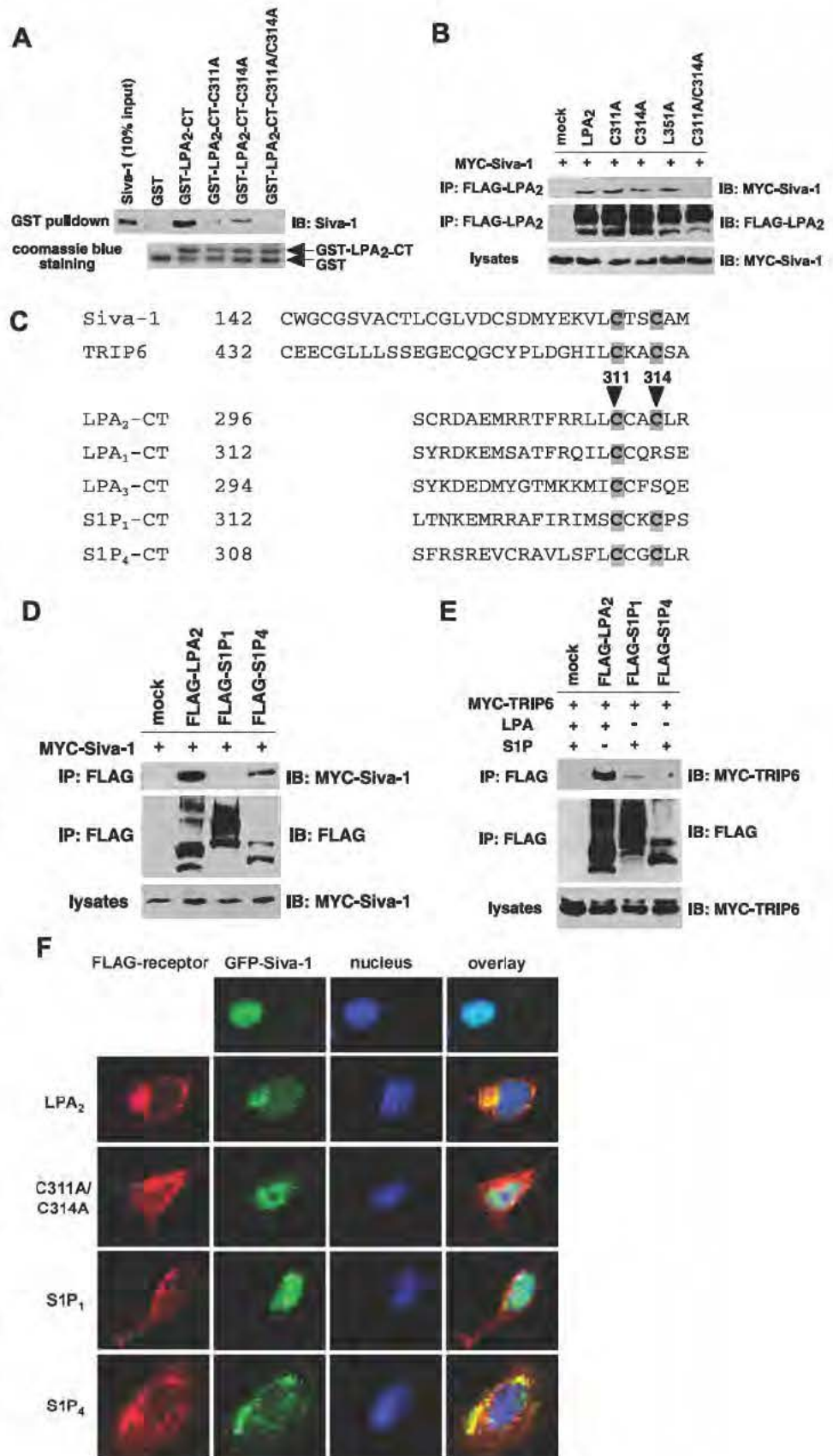
apoptosis was determined by annexin V-fluorescein isothiocyanate staining (BD Biosciences) and analyzed by flow cytometry following a 14-h treatment. SKOV-3 cells transduced with the lentivirus harboring a scrambled siRNA, TRIP6 siRNA, or a NHERF2 siRNA were starved and pre-treated with LPA followed by the addition of 50 μ M cisplatin for 20 h. Apoptosis was determined by caspase-3/7 activity assay and immunoblotting using an antibody specific to PARP-1 (BD Biosciences).

To determine apoptosis by DNA fragmentation assay, stable MEFs were seeded on plates coated with 0.1 mg/ml poly-L-lysine overnight followed by the addition of 3 μ M adriamycin in 0.5% fetal bovine serum-containing DMEM. Two μ M LPA were added 1 h later. After a 6-h treatment, DNA fragmentation was measured by enzyme-linked immunosorbent assay following the procedure of the Cell Death Detection Kit (Roche).

Statistic Analysis—Statistic significance ($p < 0.05$) was determined using Student's *t* test.

RESULTS

LPA₂-mediated Protection from Chemotherapeutic Agent-induced Apoptosis Is Regulated by Proteins Interacting with the C terminus of LPA₂—To elucidate the unique properties of LPA₂ leading to the attenuation of DNA damage-induced apoptosis, we tested the hypothesis that LPA₂-elicited antiapoptotic signaling could be regulated through the interactions with its C terminus-binding partners. We knocked down the expression of TRIP6, NHERF2, or Siva-1 in LPA_{1/2} double knock-out (DKO) MEFs stably transduced with a human LPA₂ (designated DKO-LPA₂ MEFs). These LPA_{1/2} DKO MEFs were chosen because LPA fails to induce ERK/AKT activation in these MEFs required for the antiapoptotic effect (Fig. 5C), and cannot protect them from



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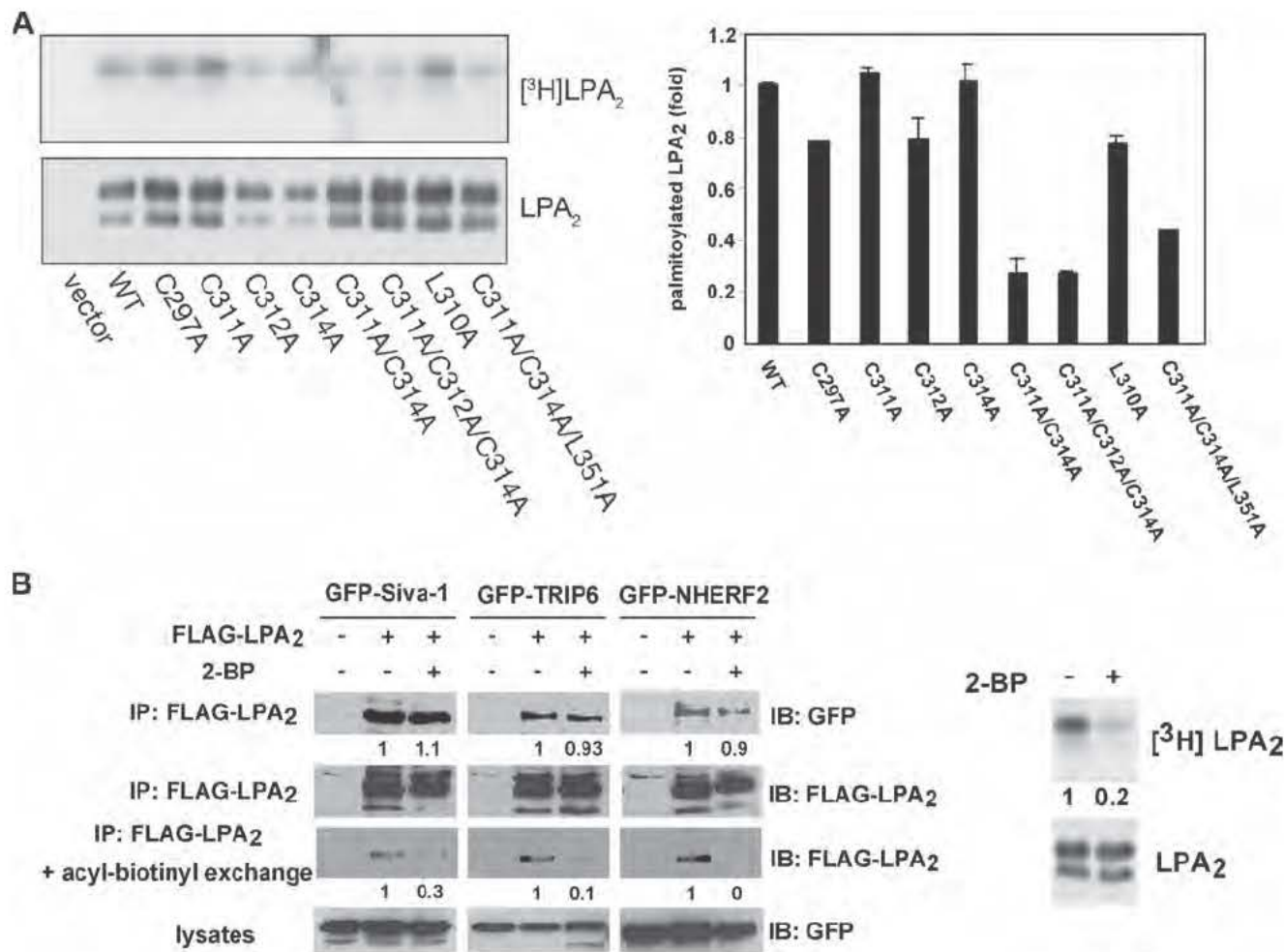


FIGURE 4. Palmitoylation modification does not affect LPA₂ binding to TRIP6, Siva-1, or NHERF2. *A*, palmitoylation of LPA₂ is partially impaired by mutation of the cysteine residues in the proximal end of its C-terminal tail. WT or one of the point mutants of FLAG-LPA₂ were transiently expressed in HEK 293T cells and labeled with [³H]palmitic acid at 37 °C for 2 h. FLAG-LPA₂ was immunoprecipitated with anti-FLAG M2 monoclonal antibody-conjugated agarose beads, resolved by SDS-PAGE, and detected by autoradiography (*left top panel*), followed by immunoblotting (*IB*) with an anti-FLAG antibody (*left bottom panel*). The *right panel* shows the relative levels of palmitoylation of each mutant compared with WT LPA₂ after normalization by total receptor expression. Data shown are the mean of two to three independent experiments. *B*, association of LPA₂ with Siva-1, TRIP6, or NHERF2 is not affected by blocking palmitoylation of LPA₂. GFP-Siva-1, GFP-TRIP6, or GFP-NHERF2 was co-expressed with FLAG-LPA₂ in HEK 293T cells. After treatment with 100 μM 2-BP in 0.1% fatty acid-free BSA-containing DMEM for 4 h, cells were stimulated with LPA for 10 min and FLAG-LPA₂ was immunoprecipitated with anti-FLAG M2 monoclonal antibody-conjugated agarose beads. Half the precipitates were resolved by SDS-PAGE and the immunoblot (*IB*) was probed with an anti-GFP polyclonal antibody to detect co-immunoprecipitated GFP-Siva-1, GFP-TRIP6, or GFP-NHERF2. The rest of the samples were subjected to the acyl-biotinyl exchange procedure to determine levels of palmitoylated LPA₂ as described under “Experimental Procedures.” A separate experiment was performed to determine the effect of 2-BP on blocking palmitoylation of LPA₂ by pretreating the FLAG-LPA₂-expressing HEK 293T cells with 100 μM 2-BP for 30 min followed by labeling with [³H]palmitic acid for 2 h (*right panel*). The relative levels of Siva-1, TRIP6, or NHERF2 co-immunoprecipitated (*IP*) with FLAG-LPA₂ were quantified and normalized to the levels of FLAG-LPA₂ immunoprecipitates. Data shown are representative of three separate experiments.

adriamycin-induced apoptosis (Fig. 5D), although they endogenously express LPA₄ and LPA₇ receptor transcripts (data not shown). We found that 60% knockdown of TRIP6 expression did not further enhance adriamycin-induced caspase-3/7 activation but significantly attenuated LPA-mediated protection and the activation of ERK and AKT (Fig.

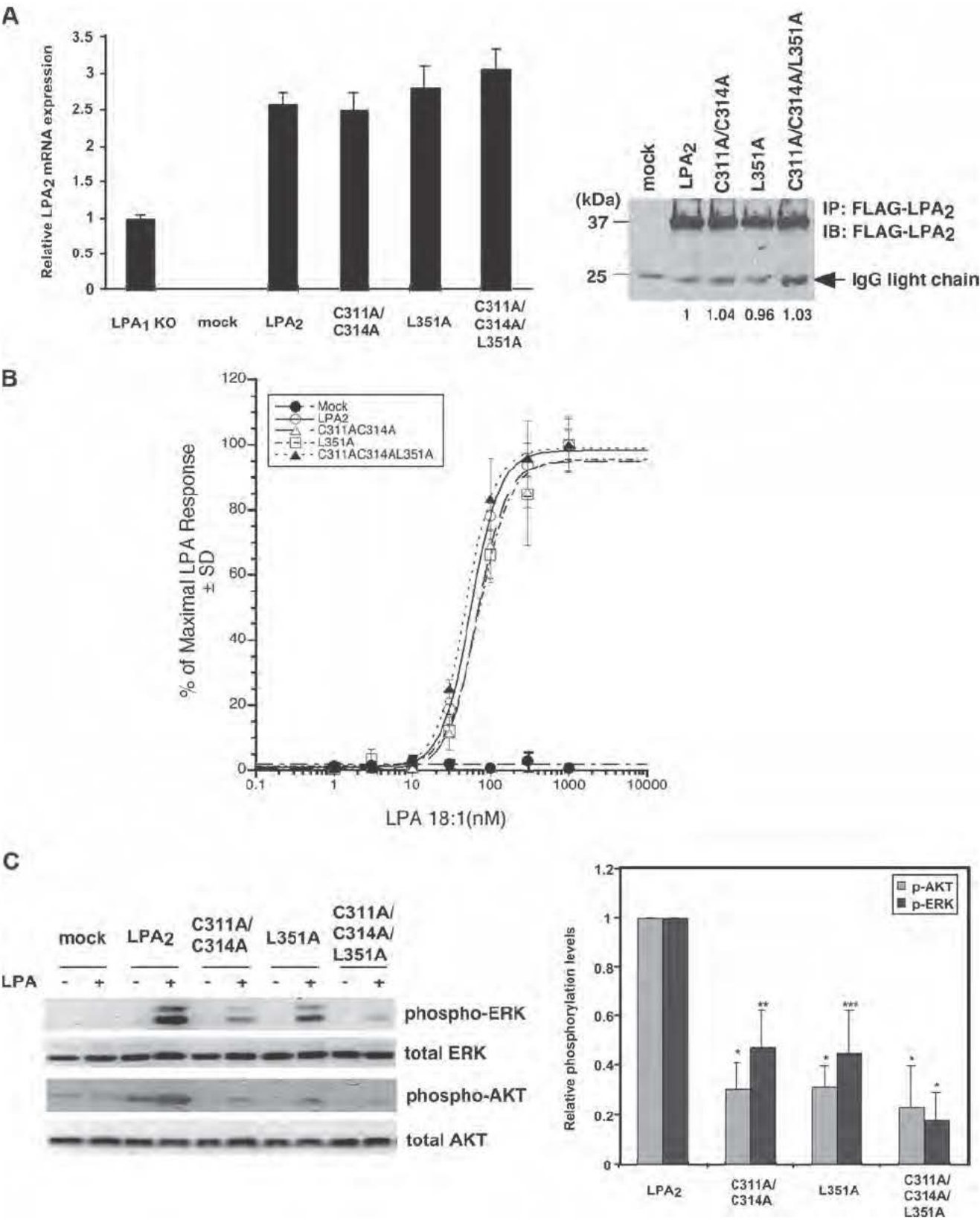
FIGURE 3. Both Cys-311 and Cys-314 residues are required for LPA₂ binding to Siva-1. *A*, *in vitro* binding of LPA₂ to Siva-1 is partially impaired by mutation of Cys-311 or Cys-314 to Ala and is completely abolished when both cysteine residues are mutated. Purified recombinant Siva-1 was incubated with glutathione S-transferase (GST), GST-LPA₂-CT, or one of the GST-LPA₂-CT mutants. Siva-1 pulled down by GST-LPA₂-CT was detected by immunoblotting using an anti-Siva-1 antibody. *B*, association of LPA₂ with Siva-1 is eliminated only when both Cys-311 and Cys-314 residues are mutated to Ala. MYC-Siva-1 was co-expressed with WT or one of the point mutants of FLAG-LPA₂ in HEK 293T cells. Cells were starved overnight and then harvested for co-immunoprecipitation (*IP*) and immunoblotting (*IB*) as described above. MYC-Siva-1 was detected with an anti-MYC polyclonal antibody. *C*, amino acid sequence alignment of the C-terminal zinc finger of Siva-1 (residues 142–172) and TRIP6-LIM3 (residues 432–462), and the proximal region of the C-terminal tail of LPA₂ (residues 296–316), LPA₁ (residues 312–332), LPA₃ (residues 294–314), S1P₁ (residues 312–322), and S1P₄ (residues 308–318). *D*, Siva-1 interacts with S1P₄ but not S1P₁. HEK 293T cells expressing MYC-Siva-1 with FLAG-tagged LPA₂, S1P₁, or S1P₄ were subjected to a co-immunoprecipitation experiment as described in *B*. *E*, TRIP6 binds weakly to S1P₁ and barely associates with S1P₄. HEK 293T cells expressing MYC-TRIP6 with FLAG-tagged LPA₂, S1P₁, or S1P₄ were starved for 8 h followed by the addition of 2 μM LPA or S1P for 10 min. Co-immunoprecipitation was performed as described above. Data shown in *A*, *B*, *D*, and *E* are representative of three independent experiments. *F*, Siva-1 colocalizes with LPA₂ and S1P₄ but not S1P₁, or the C311A/C314A mutant of LPA₂ in the cytosol. GFP-Siva-1 was transiently co-expressed with FLAG-tagged LPA₂, C311A/C314A of LPA₂, S1P₁, or S1P₄ in LPA_{1/2} DKO MEFs. Cells were fixed, permeabilized, and then incubated with the anti-FLAG M2 monoclonal antibody followed by the Texas Red X-conjugated mouse secondary antibody to detect the FLAG-tagged receptors. GFP-Siva-1 was directly visualized by fluorescence microscopy.

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1A). Knockdown of NHERF2 expression by 80% also reduced LPA-induced chemoprotection and ERK activation (Fig. 1B). In contrast, knockdown of Siva-1 expression by more than 90% reduced adriamycin-induced caspase-3/7 activation

and enhanced the LPA-mediated protective effect (Fig. 1C). These results suggest that in mouse embryonic fibroblasts, the antiapoptotic effect of LPA₂ involves NHERF2, TRIP6, and Siva-1.



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A CXXC Motif Unique to the C-terminal Tail of LPA₂ Mediates the Interactions with TRIP6 and Siva-1—To investigate if the effects of these LPA₂-interacting partners on LPA-elicited chemoprotection are regulated through direct interactions with LPA₂, next we delineated the position of the TRIP6-interacting motif in the C terminus of LPA₂. We applied deletion mutagenesis while keeping the DSTL motif intact in the mutants to permit interactions with the PDZ partners. Cellular co-immunoprecipitation demonstrated that except for $\Delta 309$ +DSTL, $\Delta 302$ +DSTL, and $\Delta 296$ mutants, other deletion mutants of LPA₂, including $\Delta 316$ +DSTL, $\Delta 327$ +DSTL, $\Delta 338$ +DSTL, $\Delta 347$, and $\Delta 348$, and the L351A point mutant that lacks PDZ binding were able to bind to TRIP6, although to a lesser degree than the WT LPA₂ (Fig. 2A). This result indicates that the minimal sequences required for TRIP6 binding contain residues 297–316. Alanine scanning mutational analysis of the 297–316 region identified Cys-311 and Cys-314 as the residues required for the interaction with TRIP6 (Fig. 2B). *In vitro* binding assays confirmed that mutation of Cys-311 and/or Cys-314 to Ala abolished the direct binding of LPA₂-CT to TRIP6 (Fig. 2C).

Next we examined the interaction of Siva-1 with WT or cysteine mutants of LPA₂. We found that only when both Cys-311 and Cys-314 were mutated was the interaction with Siva-1 completely abolished *in vitro* (Fig. 3A) and in cells (Fig. 3B). However, this binding was not affected by L351A mutation (Fig. 3B).

Among the endothelial differentiation gene family lysophospholipid receptors, the CXXC motif is unique only to the LPA-specific LPA₂ and sphingosine 1-phosphate (S1P)-specific S1P₁ and S1P₄ receptors (Fig. 3C). In contrast to LPA₂, LPA₁ and LPA₃ lack the CXXC motif in the C terminus (Fig. 3C) and fail to interact with TRIP6 and Siva-1 (17, 18). S1P₄ formed a complex with Siva-1 but barely bound to TRIP6; and S1P₁, albeit weakly, associated with TRIP6 but not Siva-1 (Fig. 3, D and E). Thus, the CXXC motifs of dis-

tinct endothelial differentiation gene family lysophospholipid receptors are capable of mediating interactions with the C-terminal zinc finger of Siva-1 or TRIP6-LIM3 (Fig. 3C), which have been shown as the LPA₂-interacting domains (17, 18); however, additional residues are required for strengthening the interactions.

Previously we have demonstrated in NIH3T3 fibroblasts that Siva-1 colocalizes with LPA₂ in the cytosol and the plasma membrane, and this association prevents nuclear translocation of Siva-1 (18). Likewise, Siva-1 colocalized with LPA₂ and S1P₄ but not S1P₁ in the cytosol in LPA_{1/2} DKO MEFs (Fig. 3F). When both Cys-311 and Cys-314 of LPA₂ were mutated to Ala, colocalization was completely abolished and Siva-1 was found in the nucleus.

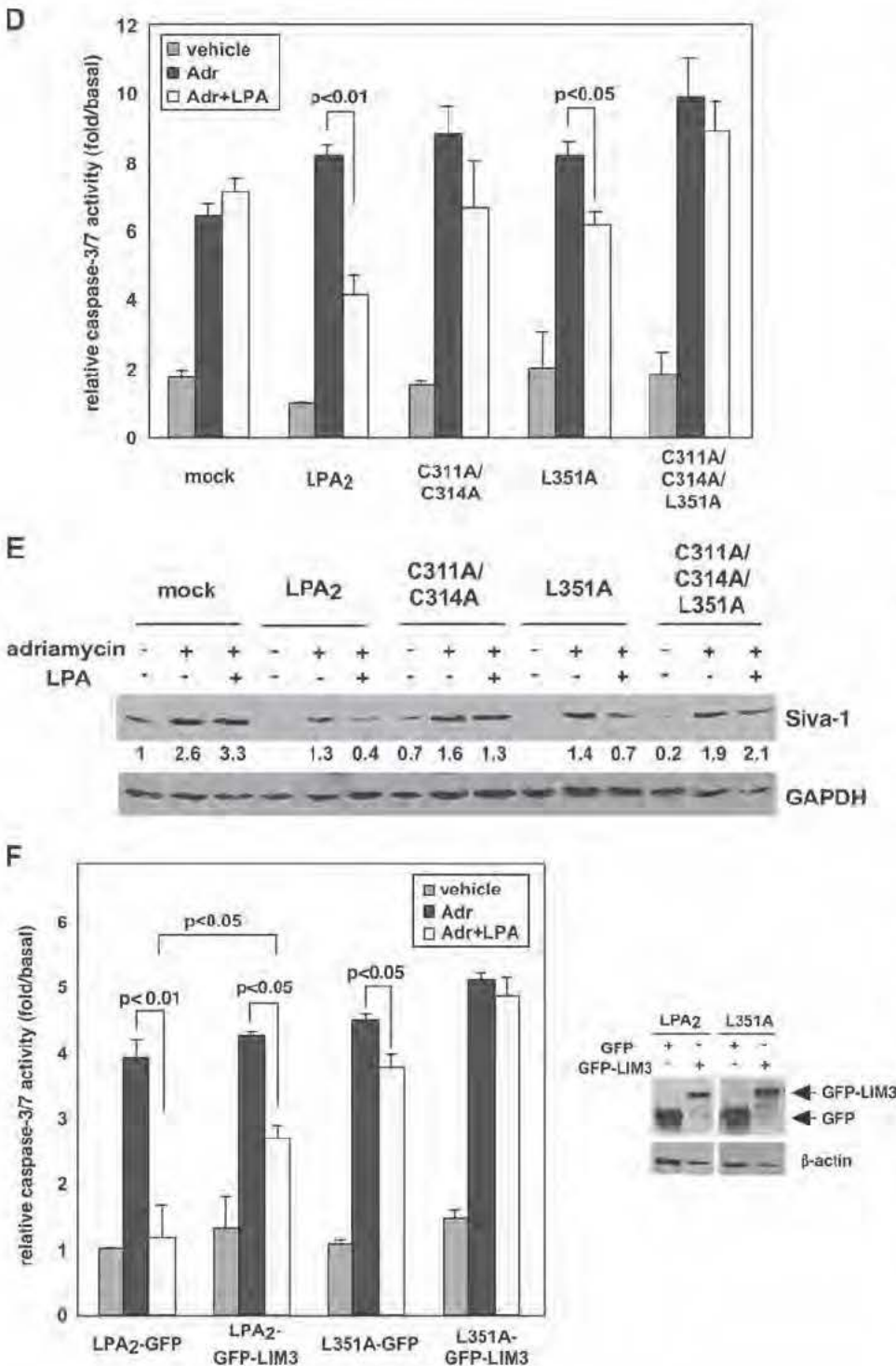
Palmitoylation of LPA₂ Does Not Affect Its Ability to Interact with TRIP6, Siva-1, or NHERF2—Many GPCRs undergo cysteine palmitoylation that may affect their coupling to G proteins, cell surface receptor expression, receptor desensitization, or trafficking (23). However, the role of palmitoylation varies among different GPCRs. Among the several cysteine residues located in the C-terminal tail of LPA₂, including Cys-297, Cys-311, Cys-312, and Cys-314, mutation of a single cysteine residue either did not or slightly reduced palmitoylation of LPA₂ (Fig. 4A). Mutation of two or three cysteine residues partially reduced receptor palmitoylation but did not completely abolish this modification (Fig. 4A).

To evaluate whether palmitoylation affects LPA₂ binding to TRIP6, Siva-1, or NHERF2, we used 2-bromopalmitate to block palmitoylation and examined these interactions. Although 2-bromopalmitate inhibits palmitoylation of LPA₂ as assayed by determining the levels of palmitoylated LPA₂ with the acyl-biotinyl exchange procedure (22) and metabolic labeling of the receptor with [³H]palmitic acid, it did not significantly affect interactions of LPA₂ with TRIP6, Siva-1, or NHERF2 (Fig. 4B).

G Protein-mediated LPA₂ Signaling to Calcium Mobilization Is Not Affected by Mutation of the CXXC- and/or PDZ-binding

FIGURE 5. Protein-protein interactions via the CXXC- and/or PDZ-binding motifs do not affect LPA₂-mediated Ca²⁺ response but regulate its chemoprotective effect. A, stable expression of LPA₂ or one of the point mutants deficient in binding to the zinc finger proteins and/or PDZ proteins in LPA_{1/2} DKO MEFs. Total mRNAs were isolated from LPA₁ KO MEFs or one of the LPA_{1/2} DKO MEF cell lines (mock, WT LPA₂, C311A/C314A, L351A, or C3131A/C314A/L351A). Quantitative real-time reverse transcriptase-PCR was performed to determine the relative expression levels of LPA₂ mRNA compared with that expressed in LPA₁ KO MEFs and was normalized by the expression of β -actin mRNA. Results show the mean \pm S.E. done in triplicates and are representative of two separate experiments. To determine total protein levels of each receptor, FLAG-LPA₂ in the whole cell lysates was immunoprecipitated using anti-FLAG M2 monoclonal antibody-conjugated agarose beads and detected with an anti-FLAG rabbit polyclonal antibody. The result shown is representative of five independent experiments. B, mutation of the CXXC motif and/or PDZ-binding motif does not affect LPA₂-mediated Ca²⁺ response. Stable LPA_{1/2} DKO MEFs were stimulated with different concentrations of LPA as indicated for 5 min. LPA-induced calcium response was determined as described previously (7). The curves for WT LPA₂ and mutants were generated by normalizing the Ca²⁺ peak at various dilutions to the response elicited by the highest concentration of LPA (1 μ M) applied. The values of the mock-transduced MEFs were normalized to that of WT LPA₂-transduced MEFs. Data shown are the mean \pm S.D. done in triplicates and are representative of two separate experiments. C, mutation of the CXXC motif and/or PDZ-binding motif attenuates LPA₂-mediated activation of ERK and AKT. Stable LPA_{1/2} DKO MEFs were stimulated with LPA for 10 min. Immunoblotting was performed to detect the levels of phosphorylated and total ERK and AKT (left panel). The intensity of each protein was quantified to determine the relative activation fold of phospho-ERK and AKT by LPA stimulation (right panel). Data shown are the mean \pm S.E. of five independent experiments. *, $p < 0.001$; **, $p < 0.01$; ***, $p < 0.05$ versus LPA-stimulated DKO-LPA₂ MEFs (Student's *t* test). D, LPA-mediated protection from adriamycin-induced caspase-3/7 activation is inhibited by mutation of both CXXC- and PDZ-binding motifs. Different LPA_{1/2} DKO MEFs transfectants were pretreated with 10 μ M LPA in 0.1% fatty acid-free BSA-containing medium for 1 h, followed by addition of 1.7 μ M adriamycin for 8 h. Apoptosis was determined by caspase-3/7 activity assay. Data show the mean \pm S.E. of four independent experiments. E, mutation of the CXXC motif abrogates LPA₂-mediated protection from adriamycin-induced Siva-1 induction. Different LPA_{1/2} DKO MEFs were pretreated with 10 μ M LPA for 2 h, followed by the addition of 1.5 μ M adriamycin for 14 h. Immunoblotting (IB) was performed to detect the expression of Siva-1 and glyceraldehyde-3-phosphate dehydrogenase (GAPDH) in the whole cell lysates. The relative expression of Siva-1 was compared with that expressed in the mock cells without any treatment and was normalized by the levels of GAPDH. The result shown is representative of three independent experiments. F, inhibition of the CXXC motif-mediated interaction with TRIP6-LIM3 attenuates LPA-mediated protection from adriamycin-induced apoptosis. pEGFP or pEGFP-TRIP6-LIM3 was transiently transfected by electroporation into LPA_{1/2} DKO MEFs that expressed WT LPA₂ or L351A. Cells were treated with 10 μ M LPA for 1 h followed by addition of 1.5 μ M adriamycin for 9 h. Caspase-3/7 activity was determined and normalized by protein concentrations in each sample. Data show the mean \pm S.E. of three independent experiments. The immunoblot shows the expression of GFP-TRIP6-LIM3, GFP, and β -actin in the whole cell lysates.

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Motifs—To investigate the impact of mutations of the C-terminal binding motifs on LPA₂ functions, lentiviral constructs harboring WT LPA₂, the C311A/C314A mutant that is unable to interact with TRIP6 and Siva-1, the L351A mutant defective in binding to PDZ proteins, or the C311A/C314A/L351A mutant that cannot bind any of the interacting partners were stably transduced into the LPA_{1/2} DKO MEFs. Compared with the endogenous LPA₂ mRNA expressed in the LPA₁^{-/-} MEFs, the WT and point mutants

of LPA₂ mRNA were expressed at 2.5- to 3-fold higher but comparable levels in the stable LPA_{1/2} DKO MEF cell lines (Fig. 5A). They were also expressed at similar protein levels in the whole cell lysates (Fig. 5A) and on the cell surface demonstrated by flow cytometry analysis (data not shown). LPA-induced Ca²⁺ mobilization showed indistinguishable dose-response curves in the MEFs expressing WT or in any of the LPA₂ mutants (Fig. 5B), indicating that these binding motifs do not affect the G_{q/11} signaling branch. These findings also imply that G_{q/11}-mediated signaling events are not altered by disruption of the palmitoylation modification of Cys-311 and Cys-314.

LPA₂-mediated Chemoprotection Is Attenuated by Mutation of the CXXC- and PDZ-binding Motifs—We reasoned that if LPA₂-mediated chemoprotection is regulated by these interacting partners, disruption of the interactions in itself would eliminate the function of TRIP6 and NHERF2 in promoting LPA₂-mediated prosurvival signaling and allow the stabilization of Siva-1, which can enhance chemotherapeutic agent-induced apoptosis. Indeed, the efficacy of LPA₂ in mediating LPA-induced ERK and AKT activation was significantly attenuated by C311A/C314A or L351A mutation and was completely abolished by the C311A/C314A/L351A mutation (Fig. 5C). These results suggest that the CXXC- and PDZ-binding motifs cooperatively regulate LPA₂-mediated prosurvival signaling.

Next we examined the effect of LPA on protecting adriamycin-induced apoptosis in these MEFs. The DNA fragmentation assay

showed that following a 6-h adriamycin treatment, LPA protected cells from apoptosis in the LPA_{1/2} DKO MEFs that expressed WT LPA₂, C311A/C314A, or L351A but not in the mock-transfected LPA_{1/2} DKO MEFs or those expressing the C311A/C314A/L351A mutant (supplemental Fig. S1A). After an 8-h treatment, the antiapoptotic efficacy of LPA₂ measured by the caspase-3/7 activity assay (Fig. 5D) was reduced by the C311A/C314A or L351A mutations and was completely abolished by the C311A/C314A/L351A muta-

LPA₂-formed Complexes Regulate Antiapoptosis

tion. A similar effect was also observed using annexin V staining after a 14-h treatment (supplemental Fig. S1B).

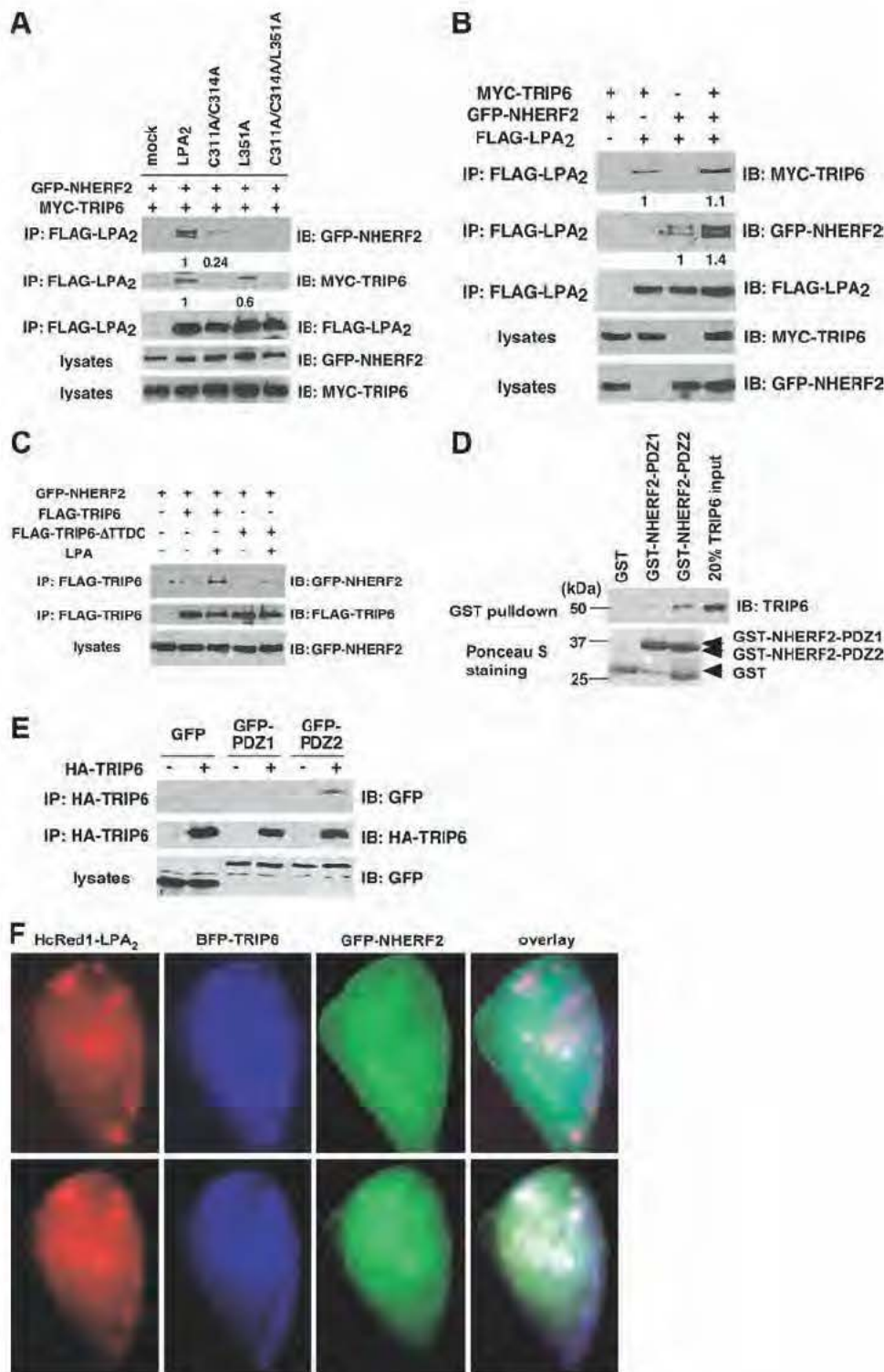
Previously we have shown that LPA inhibits adriamycin-induced Siva-1 expression and its proapoptotic functions. Analysis of these LPA₂ mutants showed that the inhibitory effect of LPA on adriamycin-induced Siva-1 expression was eliminated by mutation of the CXXC motif but not the PDZ-binding motif, confirming that this regulation is mediated through the direct interaction of LPA₂ with Siva-1 (Fig. 5E). Together, these results suggest that the CXXC- and PDZ-binding motifs differentially and cooperatively regulate LPA₂ function in protecting cells from adriamycin-induced apoptosis.

The role of Siva-1 in apoptosis is well established (18); however, TRIP6 has not yet been implicated in antiapoptotic signaling and for this reason we focused our investigation on this adapter protein. The LIM3 domain of TRIP6 binds to LPA₂, and has been shown to serve as a dominant-negative probe to attenuate LPA₂-mediated cell migration previously (17). Overexpression of the GFP-TRIP6-LIM3 mutant reduced the chemoprotective effect of LPA in the DKO-LPA₂ MEFs, and this inhibitory effect was augmented in the DKO-L351A MEFs (Fig. 5F), supporting the notion that cooperative protein-protein interactions via both CXXC- and PDZ-binding motifs are required for the maximal protective effect of LPA₂. NHERF2 binds to LPA₂ through its PDZ2 domain (10). However, we did not succeed in overexpressing NHERF2-PDZ2 to attenuate the protective effect of LPA (data not shown).

The results also showed that when G_{i/o} signaling was inhibited with PTX, LPA-mediated ERK activation and protection from adriamycin-induced apoptosis were partially attenuated in DKO-LPA₂ MEFs (supplemental Fig. S2), suggesting that G_{i/o} signaling to some extent is involved in the LPA₂-mediated antiapoptotic signaling. Nonetheless, LPA-induced recruitment of Siva-1, TRIP6, or NHERF2 was not significantly altered by treatment with PTX or the U73122 phospholipase C inhibitor

(supplemental Fig. S3, A and B), suggesting that the macromolecular complex formation via the C terminus of LPA₂ is independent on G_{i/o} or G_{q/11} signaling.

The PDZ-mediated Association of TRIP6 with NHERF2 Facilitates Their Interaction with LPA₂—When we examined the interaction of different LPA₂ mutants with TRIP6 or NHERF2, we noticed that the C311A/C314A mutant, which does not bind to TRIP6, also showed reduced association



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with NHERF2 compared with WT LPA₂ (Fig. 6A). Likewise, the L351A mutant defective in binding to NHERF2 showed reduced association with TRIP6 (Fig. 6A) but not Siva-1 (Fig. 3B). Conversely, the interaction of NHERF2 or TRIP6 with LPA₂ was further enhanced when all three proteins were overexpressed (Fig. 6B). TRIP6 contains a C-terminal TTDC PDZ-binding motif, potentially allowing it to interact with PDZ proteins, raising the possibility that cooperativity might exist between TRIP6 and NHERF2 in interacting with LPA₂. Indeed, we found LPA induced the association of NHERF2 with TRIP6 but not the TRIP6-ΔTTDC mutant in HEK 293T cells (Fig. 6C). Domain mapping confirmed that TRIP6 preferentially binds to PDZ2 but not PDZ1 of NHERF2 *in vitro* (Fig. 6D) and also in HEK 293T cells (Fig. 6E). Because both LPA₂ and TRIP6 bind to the PDZ2 domain of NHERF2, NHERF2 must be present in dimer form to bridge LPA₂ and TRIP6. In support of this notion, it is known that NHERF2 forms oligomers through PDZ1- and/or PDZ2-mediated self-association (24).

To address whether LPA₂, TRIP6, and NHERF2 are present in the same macromolecular complex, fluorescence microscopy was performed to examine subcellular distribution of these molecules. We found that HcRed1-LPA₂, BFP-TRIP6, and GFP-NHERF2 formed clusters and colocalized in close proximity to the plasma membrane or inside the cytosol after LPA treatment for 10 min (Fig. 6F). Together, these results suggest that LPA₂ forms a ternary macromolecular complex with TRIP6 and NHERF2 by LPA stimulation.

TRIP6 and NHERF2 Regulate LPA-mediated Chemoprotection in Ovarian Cancer Cells—To understand the physiological relevance of NHERF2-TRIP6-LPA₂ ternary complex formation, co-immunoprecipitation was performed in SKOV-3 cells that express high levels of these three proteins. LPA induced the association of LPA₂ with both TRIP6 and NHERF2 at physiological levels (Fig. 7A). When TRIP6 expression was knocked down, the interaction of NHERF2 with LPA₂ was significantly attenuated, suggesting that TRIP6 facilitates this association. However, the association of TRIP6 with LPA₂ was not significantly altered by knockdown of NHERF2 expression (supplemental Fig. S4), perhaps because either TRIP6 binds to LPA₂ with a higher affinity or

other LPA₂-interacting PDZ proteins can also facilitate the association of TRIP6 with LPA₂. In SKOV-3 cells, TRIP6 associated with NHERF2 constitutively. Nonetheless, formation of the ternary complex required LPA stimulation (Fig. 7B).

LPA also protected cells from cisplatin-induced caspase-3/7 activation and PARP-1 cleavage in SKOV-3 ovarian cancer cells (Fig. 7C). We found 60% knockdown of TRIP6 expression attenuated LPA-mediated chemoprotection in SKOV-3 cells (Fig. 7C) as that shown in DKO-LPA₂ MEFs (Fig. 1A). When TRIP6 expression was knocked down by 80–90%, the protective effect of LPA on cisplatin-induced caspase-3/7 activation and PARP-1 cleavage was almost completely eliminated (Fig. 7C). A similar effect was found by 90% knockdown of NHERF2 expression (Fig. 7D). Together, these results suggest that both TRIP6 and NHERF2 play a significant role in the LPA-mediated antiapoptotic effect in SKOV-3 cells. Lacking functional p53, cisplatin only induced modest Siva-1 expression in SKOV-3 cells (Fig. 7C). Although both TRIP6 and Siva-1 bind to the CXXC motif of LPA₂, knockdown of TRIP6 expression did not alter the effect of LPA on reducing Siva-1 expression.

In summary, these data suggest that LPA induces the formation of a ternary complex containing LPA₂, TRIP6, and NHERF2. Our results favor the model that in addition to binding to Siva-1 and down-regulating its activity, LPA₂ forms a supramolecular complex with TRIP6 and NHERF2. Together, they coordinately regulate the antiapoptotic signaling of LPA₂ (Fig. 7E).

DISCUSSION

GPCRs are increasingly viewed as a nidus for generating ligand-activated intracellular signals via interactions with G proteins and non-G protein signaling molecules (25, 26). We hypothesized that the macromolecular complex formed via the unique C-terminal binding motifs of LPA₂ could be responsible for its antiapoptotic function. This hypothesis was based in part on the high degree of sequence diversity in the C termini of the endothelial differentiation gene family LPA receptors, which show only seven of 55 residues are conserved in the C terminus, in contrast to the 85% homology in their transmembrane

FIGURE 6. A PDZ-mediated association of TRIP6 and NHERF2 facilitates their interactions with LPA₂. A, mutation of the CXXC (PDZ-binding) motif of LPA₂ abolishes the binding to TRIP6 (NHERF2) and also reduces the association with NHERF2 (TRIP6). GFP-NHERF2 and MYC-TRIP6 were coexpressed with WT or one of the mutants of FLAG-LPA₂ in HEK 293T cells. Co-immunoprecipitation (IP) was performed as described above. The relative levels of co-immunoprecipitated TRIP6 or NHERF2 were quantified and normalized to the immunoprecipitated WT or mutant of LPA₂. B, overexpression of TRIP6 enhances association of NHERF2 with LPA₂, and vice versa. FLAG-LPA₂ was co-expressed with MYC-TRIP6 and/or GFP-NHERF2 in HEK 293T cells as indicated. After stimulation of the cells with 2 μM LPA for 10 min, co-immunoprecipitation was performed. GFP-NHERF2 and MYC-TRIP6 co-immunoprecipitated with FLAG-LPA₂ were detected with an anti-GFP antibody and an anti-MYC antibody, respectively. The blot was reprobed with an anti-FLAG antibody to detect the immunoprecipitated LPA₂. The relative levels of co-immunoprecipitated TRIP6 or NHERF2 were quantified and normalized to the immunoprecipitated FLAG-LPA₂. C, C-terminal TTDC sequences of TRIP6 mediate the binding to NHERF2. FLAG-TRIP6 or FLAG-TRIP6-ΔTTDC mutant lacking the C-terminal PDZ-binding motif was co-expressed with GFP-NHERF2 in HEK 293T cells. After stimulation of the cells with LPA for 10 min, WT or the ΔTTDC mutant of TRIP6 was immunoprecipitated with anti-FLAG M2 mouse monoclonal antibody-conjugated agarose beads and resolved by SDS-PAGE. Immunoblotting (IB) was performed using the antibodies specific to GFP and the FLAG epitope to detect GFP-NHERF2 and FLAG-TRIP6, respectively. D, TRIP6 binds to the PDZ domain of NHERF2 directly *in vitro*. Purified recombinant TRIP6 was incubated with GST, GST-NHERF2-PDZ1, or GST-NHERF2-PDZ2 at 4 °C for 3 h. TRIP6 pulled down by glutathione S-transferase (GST) fusion proteins was detected by immunoblotting using an anti-TRIP6 antibody. The bottom panel shows expression of GST fusion proteins by Ponceau S staining. E, TRIP6 interacts with the PDZ2 but not PDZ1 domain of NHERF2 in cells. HA-TRIP6 was co-expressed with GFP, GFP-NHERF2-PDZ1, or GFP-NHERF2-PDZ2 in HEK 293T cells. TRIP6 in the whole cell lysates was immunoprecipitated with anti-HA mouse monoclonal antibody-conjugated agarose beads and resolved by SDS-PAGE. The immunoblot was probed with an anti-GFP antibody to detect GFP-NHERF2-PDZ2. The blot was reprobed with an anti-HA rabbit antibody to detect the immunoprecipitated HA-TRIP6. Data shown in each figure are representative of two to four independent experiments. HA, hemagglutinin. F, LPA₂, TRIP6, and NHERF2 colocalize in cells. Hc-Red1-LPA₂ was transiently co-expressed with BFP-TRIP6 and GFP-NHERF2 in LPA₂ DKO MEFs. Cells were starved for 1 h, followed by addition of 2 μM LPA for 10 min. Subcellular distribution of these molecules was visualized by fluorescence microscopy.

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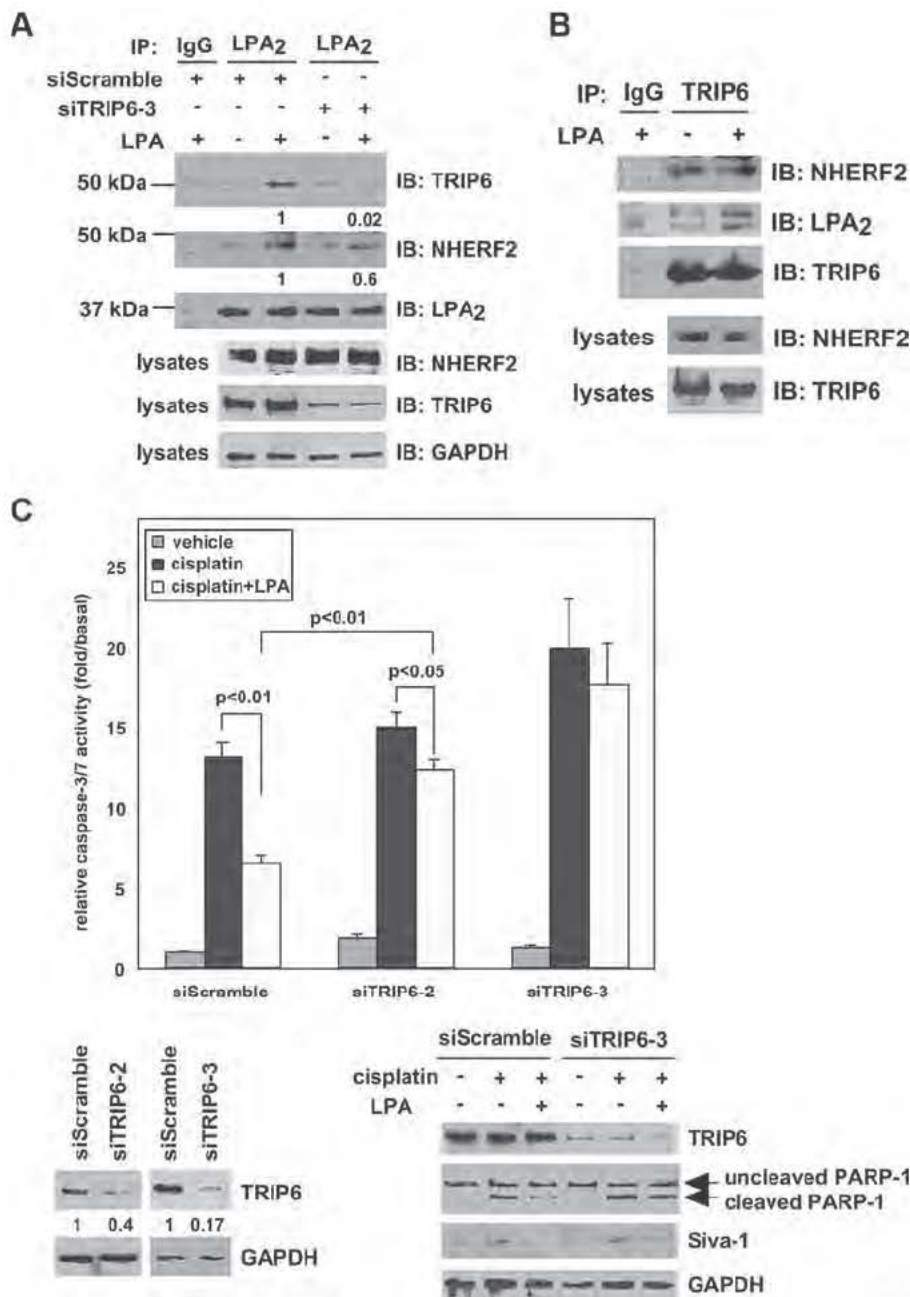


FIGURE 7. Endogenous TRIP6 and NHERF2 form a ternary complex with LPA₂ by LPA stimulation, and regulate LPA-mediated chemoprotection in SKOV-3 cells. A, inhibition of TRIP6 expression reduces LPA-induced association of NHERF2 with LPA₂. SKOV-3 cells expressing a scrambled siRNA or a TRIP6 siRNA (*siTRIP6-3*) were starved overnight followed by treatment with 2 μ M LPA for 10 min. LPA₂ in the whole cell lysates was immunoprecipitated (IP) with an anti-LPA₂ rat antibody or a control IgG and resolved by SDS-PAGE. Immunoblotting (IB) was performed using the antibodies specific to NHERF2, TRIP6, and LPA₂, respectively. The bottom three panels show expression of NHERF2, TRIP6, and control glyceraldehyde-3-phosphate dehydrogenase (GAPDH) in the whole cell lysates. The relative levels of co-immunoprecipitated TRIP6 or NHERF2 were quantified and normalized to the immunoprecipitated FLAG-LPA₂. B, TRIP6 interacts with NHERF2 constitutively in SKOV-3 cells. SKOV-3 cells were treated with LPA as described in A. TRIP6 in the whole cell lysates was immunoprecipitated with an anti-TRIP6 mouse monoclonal antibody or a control IgG. After SDS-PAGE, the immunoblot was probed with an anti-NHERF2 antibody, an anti-LPA₂ antibody followed by an anti-TRIP6 antibody. Results shown in A and B are representative of three independent experiments. C and D, LPA-mediated protection of SKOV-3 cells from cisplatin-induced apoptosis is eliminated by knockdown of TRIP6 or NHERF2 expression. SKOV-3 cells expressing a scrambled siRNA or one of the siRNAs that specifically target human TRIP6 (*siTRIP6-2* and *siTRIP6-3*) (C) or NHERF2 (*siNHERF2-4*, *siNHERF2-5*) (D) as indicated were pretreated with 10 μ M LPA for 1 h followed by the addition of 50 μ M cisplatin for 20 h. Caspase-3/7 activity was determined. Data shown are the mean \pm S.E. of three independent experiments. The knockdown effect of each TRIP6 siRNA or NHERF2 siRNA was determined by immunoblotting using an antibody specific to TRIP6 or NHERF2, respectively. Half of the lysates as indicated were subjected to immunoblotting using the antibodies specific to PARP-1, Siva-1, NHERF2, and GAPDH, respectively. E, a model for the regulation of LPA₂-mediated antiapoptotic signaling through the CXXC-mediated interaction with Siva-1, and the CXXC- and PDZ-mediated LPA₂-TRIP6-NHERF2 ternary complex formation.

domains. In support of this hypothesis, it has been shown that PDZ proteins, including NHERF2, interact with the C-terminal DSTL motif of LPA₂ but not with other LPA receptor subtypes (10, 12, 13). Moreover, LPA₂ is the only LPA receptor subtype that interacts with Siva-1 and TRIP6 (17, 18).

Using the LPA_{1/2} DKO MEFs that stably express a human LPA₂ as the model system, we present evidence that siRNA-mediated knockdown of TRIP6 or NHERF2 expression attenuates LPA₂-mediated chemoprotection; in contrast, knockdown of Siva-1 enhances this effect. We have mapped the ³¹¹CXXC³¹⁴ motif of LPA₂ required for interactions with TRIP6 and Siva-1, and demonstrated that disruption of either the CXXC motif or PDZ-binding motif attenuated LPA₂-mediated chemoprotection, and only when both binding motifs were disrupted, it completely abolished this effect. Together, these data indicate that LPA₂-mediated chemoprotection is regulated through these supramolecular complexes.

Palmitoylation of the four C-terminal cysteine residues of LPA₂ showed that those in the CXXC motif can be lipid-modified, however, inhibition of this modification did not disrupt interaction with TRIP6 or Siva-1, indicating that palmitoylation of LPA₂ is neither required nor preclusive for the interaction with TRIP6 or Siva-1. We also found that blocking G_{i/o} protein activation with PTX or inhibiting G_{q/11} signaling with the U73122 phospholipase C inhibitor did not affect the interaction of LPA₂ with Siva-1, TRIP6, or NHERF2, suggesting that G protein signaling is also not required for these protein interactions. On the other hand, mutation of the CXXC- or PDZ-binding motif of LPA₂ did not affect G_{q/11}-mediated Ca²⁺ transients upon LPA stimulation, indicating that these binding motifs do not affect the G_{q/11} signaling branch.

Unexpectedly, we found that truncation or point mutations that

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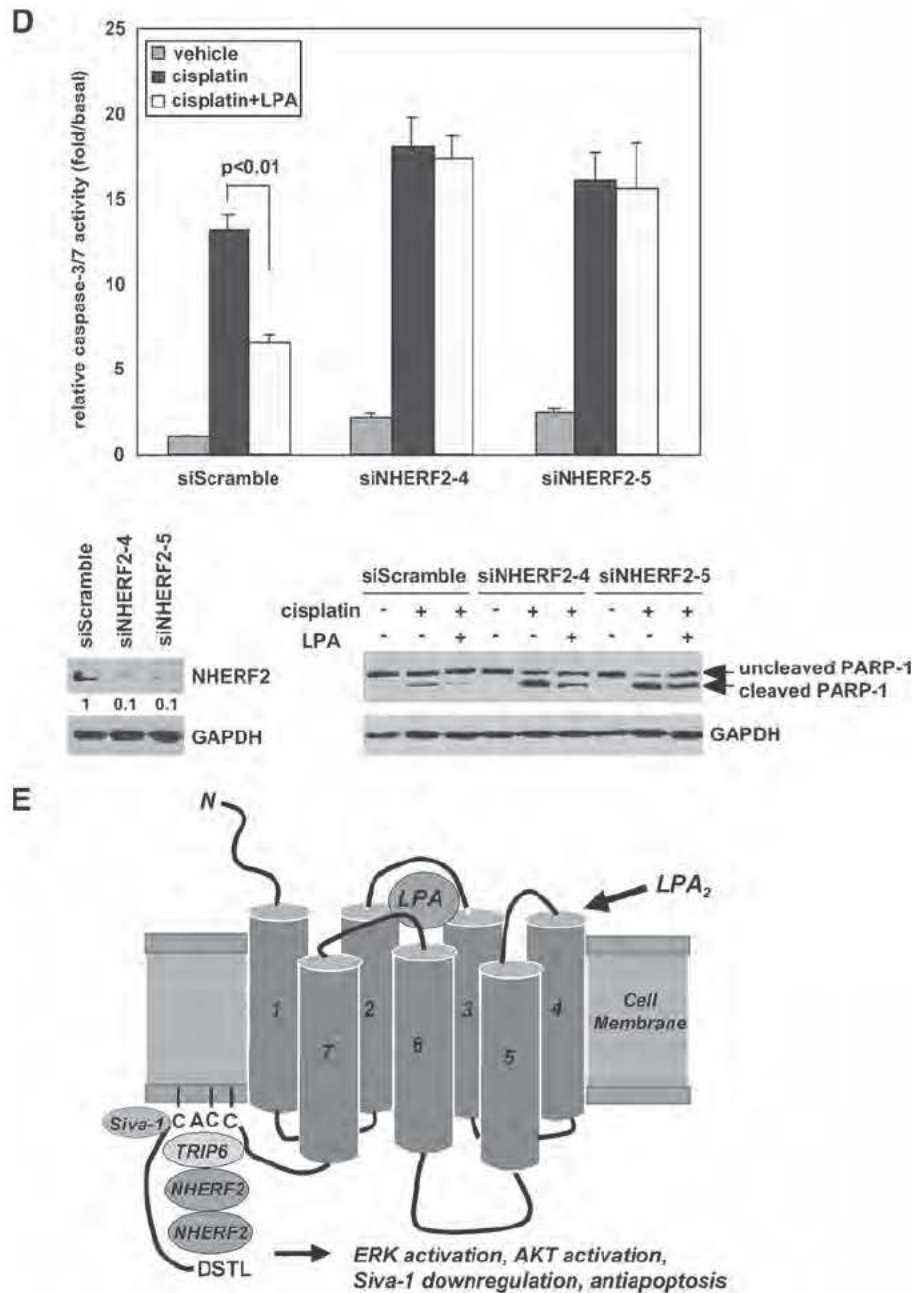


FIGURE 7—continued

abolish the interactions of LPA₂ with PDZ proteins also attenuated the binding of TRIP6 to LPA₂. These observations led us to hypothesize that cooperativity might exist between TRIP6 and NHERF2 in interacting with LPA₂. Indeed, we found evidence that TRIP6 interacts with the PDZ2 domain of NHERF2 via its C-terminal TTDC PDZ-binding motif. Overexpression of TRIP6 augments the complex formation between LPA₂ and NHERF2, whereas knockdown of TRIP6 diminishes it. Moreover, upon ligand activation LPA₂ colocalizes with both TRIP6 and NHERF2. Thus, it is likely that LPA₂, TRIP6, and NHERF2 form a ternary complex in the microdomain of the plasma membrane to coordinately regulate LPA₂-elicited chemoprotective effect. This complex appears to be assembled upon LPA

stimulation in SKOV-3 cells at endogenous levels of the participating proteins. Our new data and previous reports (10, 12, 20, 27) show that both TRIP6 and NHERF2 are involved in LPA-induced ERK and AKT activation. SKOV-3 ovarian cancer cells show very low levels of phosphatase and tensin homolog but high activity of AKT (28, 29). When TRIP6 or NHERF2 was knocked down to a great extent, it almost completely eliminated LPA-mediated chemoprotection in SKOV-3 cells. Similarly, it has been reported that knockdown of NHERF2 expression abrogates the chemoprotective effect of LPA in colon cancer cells (27).

We also note that the CXXC motif is required for the antiapoptotic effect through the inhibition of Siva-1 signaling. However, Siva-1 interaction with LPA₂ does not appear to be affected by disruption of the LPA₂ interaction with PDZ proteins. Our data showed that PTX slightly attenuated LPA-induced chemoprotection, suggesting that G_{i/o}-mediated signals contribute to but are not sufficient for the full antiapoptotic effect of LPA₂. Assembly of the LPA₂-TRIP6-NHERF2 ternary complex appears to play a fundamental role in the ability of LPA to render cancer cells resistant to chemotherapeutic agents as we have demonstrated for the case of adriamycin and cisplatin.

Taken together, these data point to a novel signal amplification/diversification mechanism originat-

ing from the GPCR signal transduction hub. We favor the hypothesis that signals from protein-protein interactions via the C-terminal CXXC- and PDZ-binding motifs are integrated with G protein-activated signals to cooperatively regulate the antiapoptotic function of LPA₂.

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REFERENCES

1. Mills, G. B., and Moolenaar, W. H. (2003) *Nat. Rev. Cancer* 3, 582–591
2. Moolenaar, W. H., van Meeteren, L. A., and Giepmans, B. N. (2004) *Bioes-*

LPA₂-formed Complexes Regulate Antiapoptosis

- says 26, 870–881
3. Parrill, A. L. (2008) *Biochim. Biophys. Acta* 1781, 540–546
 4. Pasternack, S. M., von Kugelgen, I., Aboud, K. A., Lee, Y. A., Ruschendorf, F., Voss, K., Hillmer, A. M., Molderings, G. J., Franz, T., Ramirez, A., Nurnberg, P., Nothen, M. M., and Betz, R. C. (2008) *Nat. Genet.* 40, 329–334
 5. Tabata, K., Baba, K., Shiraishi, A., Ito, M., and Fujita, N. (2007) *Biochem. Biophys. Res. Commun.* 363, 861–866
 6. Radeff-Huang, J., Seasholtz, T. M., Matteo, R. G., and Brown, J. H. (2004) *J. Cell Biochem.* 92, 949–966
 7. Deng, W., Shuyu, E., Tsukahara, R., Valentine, W. J., Durgam, G., Gududuru, V., Balazs, L., Manickam, V., Arsura, M., VanMiddlesworth, L., Johnson, L. R., Parrill, A. L., Miller, D. D., and Tigyi, G. (2007) *Gastroenterology* 132, 1834–1851
 8. Lin, F. T., and Lai, Y. J. (2008) *Biochim. Biophys. Acta* 1781, 558–562
 9. Li, C., Dandridge, K. S., Di, A., Marrs, K. L., Harris, E. L., Roy, K., Jackson, J. S., Makarova, N. V., Fujiwara, Y., Farrar, P. L., Nelson, D. J., Tigyi, G. J., and Naren, A. P. (2005) *J. Exp. Med.* 202, 975–986
 10. Oh, Y. S., Jo, N. W., Choi, J. W., Kim, H. S., Seo, S. W., Kang, K. O., Hwang, J. I., Heo, K., Kim, S. H., Kim, Y. H., Kim, I. H., Kim, J. H., Banno, Y., Ryu, S. H., and Suh, P. G. (2004) *Mol. Cell Biol.* 24, 5069–5079
 11. Yamada, T., Ohoka, Y., Kogo, M., and Inagaki, S. (2005) *J. Biol. Chem.* 280, 19358–19363
 12. Yun, C. C., Sun, H., Wang, D., Rusovici, R., Castleberry, A., Hall, R. A., and Shim, H. (2005) *Am. J. Physiol.* 289, C2–C11
 13. Zhang, H., Wang, D., Sun, H., Hall, R. A., and Yun, C. C. (2007) *Cell. Signal.* 19, 261–268
 14. Takahashi, Y., Morales, F. C., Kreimann, E. L., and Georgescu, M. M. (2006) *EMBO J.* 25, 910–920
 15. Wu, Y., Dowbenko, D., Spencer, S., Laura, R., Lee, J., Gu, Q., and Lasky, L. A. (2000) *J. Biol. Chem.* 275, 21477–21485
 16. Chun, J., Kwon, T., Lee, E., Suh, P. G., Choi, E. J., and Sun Kang, S. (2002) *Biochem. Biophys. Res. Commun.* 298, 207–215
 17. Xu, J., Lai, Y. J., Lin, W. C., and Lin, F. T. (2004) *J. Biol. Chem.* 279, 10459–10468
 18. Lin, F. T., Lai, Y. J., Makarova, N., Tigyi, G., and Lin, W. C. (2007) *J. Biol. Chem.* 282, 37759–37769
 19. Bach, I. (2000) *Mech. Dev.* 91, 5–17
 20. Lai, Y. J., Chen, C. S., Lin, W. C., and Lin, F. T. (2005) *Mol. Cell. Biol.* 25, 5859–5868
 21. Fortin, A., MacLaurin, J. G., Arbour, N., Cregan, S. P., Kushwaha, N., Callaghan, S. M., Park, D. S., Albert, P. R., and Slack, R. S. (2004) *J. Biol. Chem.* 279, 28706–28714
 22. Wan, J., Roth, A. F., Bailey, A. O., and Davis, N. G. (2007) *Nat. Protoc.* 2, 1573–1584
 23. Qanbar, R., and Bouvier, M. (2003) *Pharmacol. Ther.* 97, 1–33
 24. Lau, A. G., and Hall, R. A. (2001) *Biochemistry* 40, 8572–8580
 25. Hur, E. M., and Kim, K. T. (2002) *Cell. Signal.* 14, 397–405
 26. Maudsley, S., Martin, B., and Luttrell, L. M. (2005) *J. Pharmacol. Exp. Ther.* 314, 485–494
 27. Rusovici, R., Ghaleb, A., Shim, H., Yang, V. W., and Yun, C. C. (2007) *Biochim. Biophys. Acta* 1770, 1194–1203
 28. Longva, K. E., Pedersen, N. M., Haslekas, C., Stang, E., and Madshus, I. H. (2005) *Int. J. Cancer* 116, 359–367
 29. Wang, H. Q., Altomare, D. A., Skele, K. L., Poulikakos, P. I., Kuhajda, F. P., Di Cristofano, A., and Testa, J. R. (2005) *Oncogene* 24, 3574–3582

A tightly regulated single genome Tet-On adenoviral vector

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Abstract

We constructed a tightly regulated single genome Tet-On adenoviral vector containing a DOX-regulated transcriptional unit for expression of the gene of interest and a constitutive transcriptional unit for expression of the Tet reverse transactivator. The first transcriptional unit consisting of the second-generation tetracycline (Tet) regulated promoter pTRE-tight was inserted into the E1 deletion region. The second unit consisting of the second-generation reverse transactivator rtTA-M2 driven by a minimal EF1 α promoter was inserted into the E3 deletion region. To test this system, recombinant adenovirus expressing the reporter gene EGFP was produced in AD293 cells and used to transduce HeLa cells. Following doxycycline (DOX) treatment, EGFP expression was tightly regulated in a spatiotemporal manner with almost undetectable basal leakiness. This single genome viral vector provides a convenient and powerful tool for gene function or gene therapy studies by eliminating the inefficiency of co-infection with two separate viruses. It represents an advance from previous single vector Tet-regulated adenoviruses by virtue of the more tightly regulated pTRE-tight promoter, the higher transactivating activity of rtTA-M2 and the smaller mini-EF1 α promoter.

Introduction

The tetracycline-controlled Tet-On or Tet-Off vectors are the most widely used regulated gene expression systems that allow for the dose-dependent transgene expression (1). Whereas, transcription is turned off in the presence of tetracycline in

the Tet-Off system (2), in the Tet-On system, the reverse tetracycline-responsive transcriptional activator rtTA activates transcription by binding to Tet operator sequences embedded in a promoter (3). Recent innovations in both systems resulted in tightly negative or positive control of transgene expression. Adenoviral vectors are one of the most efficient viral vector systems for delivering foreign genes into cells (4-6). The most frequently used inducible adenoviral vector systems rely on a double-infection strategy that is time-consuming and requires construction of two separate viruses each with E1 gene-substitutions (7). Moreover, the efficiency is relatively low for two viruses transducing the same cells simultaneously, even when a very high multiplicity of infection (MOI) is applied, resulting in highly variable transgene expression. Previous reports have described doxycycline (DOX) inducible single adeno-genome vector systems (8-10), but these systems use the first generation Tet-regulated promoters and first generation rtTA which are relatively leaky (high basal level of gene expression). In addition, neither of these systems has been placed in a public access reagent depository and they are not commercially available. We constructed a more tightly regulated single genome, doxycycline inducible adenoviral vector, which is very convenient to be used for gene functional studies by solely inserting the gene of interest into one of shuttle vectors, pE1.2-Tet. The recombinant adenoviral genome can be efficiently generated through phage based cosmid, which usually yields 100% correct recombination(11,12). The adenovirus can be quickly rescued by transfection of AD293 cells.

Materials and Methods

Cells and Reagents

AD293 and HeLa cell lines were maintained in DMEM culture medium supplemented with 10% fetal bovine serum (Mediatech Inc., Manassas, VA), 20 unit/mL penicillin, and 0.02% mg/mL streptomycin under 5% CO₂ at 37 °C. Restriction and modification enzymes were purchased from the New England Biolabs (Beverly, MA), and T4 DNA ligase was purchased from Takara (Pittsburgh, PA). DOX was purchased from Clontech (Mountain View, CA)

Construction of the shuttle vectors

This single genome, DOX inducible adenoviral vector system has two shuttle vectors, pE1.2-Tet and pE3.1-mini-EF1 α -rtTA-M2. The pE1.2-Tet contained a DOX-regulated promoter and multiple cloning sites (MCS) as well as a polyA sequence. This shuttle vector was constructed as follows. First a DOX-regulated promoter was amplified from pTRE-Tight vector (Clontech, Mountain View, CA) using PCR with the 5' ATATTCGCGACGAGTTTACTCCCTATCAGTG 3' (forward) and 5' ATAGCTAGCGGCGATCTGACGGTTCATAA 3'(reverse) primers. The forward primer contains an NruI site (underlined) and the reverse primer contains a NheI site. The resulting PCR product was digested with NruI and NheI. This promoter was used to replace the CMV promoter from pcDNA3.1-Zeo (Invitrogen, Carlsbad, CA). The resulting plasmid pcDNA3.1-Tet-Zeo was cleaved with PuvII, the ends blunted with Klenow polymerase, and finally recleaved with BglII. The fragment containing the Tet promoter, multiple cloning sites (MCS) and bovine growth hormone polyA

sequences was purified and introduced into the BglII and Klenow-modified KpnI sites of the pE1.2 plasmid (O.D. 260 Inc., Boise, IA).

The pE3.1-mini-EF1 α shuttle vector was constructed by inserting a EF1 α mini-promoter, MCS and polyA sequences into pE3.1 (O.D. 260 Inc., Boise, IA). The mini-EF1 α promoter was amplified by PCR from the pEF6/myc-his plasmid (Invitrogen, Carlsbad, CA) using the following primers: 5' TCGGCGCTTCGCGATCTAGACGTGAGGCTCCGGTGCCCGTC 3'(forward) and 5' ACGCGCTAGCCTGTGTTCTGGCGGCAAAC 3'(reverse). The primers contain NruI and NheI sites (underlined) with an additional Xba I site (double underlined) in the forward primer. The PCR-amplified EF1 α mini-promoter was digested with NruI and NheI and ligated into the NruI and XbaI sites of pcDNA3.1 in place of the CMV promoter to generate plasmid pcDNA3.1-mini-EF1 α . The fragment encompassing the mini-EF1 α promoter, MCS and the polyA sequences was isolated after digestion with XbaI and PvuII, then inserted into XbaI and Klenow-blunted KpnI sites of the pE3.1 plasmid. Finally, the reverse transactivator rtTA-M2 cDNA was inserted into the BamHI and EcoRI sites of pE1.3-mini-EF1 α to generate the shuttle vector pE1.3-mini-EF1 α -rtTA-M2.

Construction of the recombinant adenoviral genome

The reporter gene EGFP was cloned into BamHI and EcoRI sites of pE1.2-Tet to generate the shuttle vector pE1.2-Tet-EGFP. To make an EGFP recombinant adenovirus, pE1.2-Tet-EGFP and pE3.1-mini-EF1 α -rtTA-M2 were digested with DraIII. The fragments containing the EGFP and rtTA-M2 expression cassettes from these two shuttle vectors were purified and ligated with Sfi-digested

AdenoQuickTM13.1 adeno-genome DNA (O.D. 260, Inc., Boise, IA) in a 10 µl volume, at 16 °C overnight. A 2 µl aliquot from the ligation reaction was mixed with 6 µl λ packaging extract (Stratagene, La Jolla, CA), incubated for 90 min at room temperature, the reaction was stopped by adding 200 µl SM buffer (0.1 M NaCl, 8 mM MgSO₄, 50 mM Tris-HCl pH 7.5, 0.01% (w/v) gelatin) and 10 µl chloroform. After brief vortexing and centrifugation, the supernatant was used to infect *E. coli* Top 10F' (Invitrogen, Carlsbad, CA). After DNA packaging into phage and *E. coli* infection, cosmid DNA was purified from several colonies and the desired recombinants were identified by restriction enzyme analysis separately with BamHI and EcoRI.

Virus generation, purification and infection

DNA from a correct recombinant was linearized with PacI and transfected into AD293 cells using SuperFect Transfection reagent (Qiagen, Valencia, CA). Recombinant Ad-EGFP virus particles were harvested 7-10 days following the transfection, then amplified and purified with a Vivapure Adenopack (Sartorius Stedim, Inc. Concord, CA) according to the manufacturer's protocol.

Virus stocks were titrated using Adeno-X Rapid Titer Kit (Clontech, Mountain View, CA). Typically titers of the purified virus stocks were greater than 10¹⁰ infectious units/ml using this method. HeLa cells were infected at an M.O.I. of 10 for 2 h, followed by a single wash with DMEM and then cultured in 2 ml DMEM supplemented with 10% FBS and different concentration of doxycycline for the indicated periods of time.

Results and Discussion

As the basis of the new DOX-inducible single genome adenoviral vector system we constructed two shuttle vectors, pE3.1-mini-EF1 α -rtTA-M2 and pE1.2-Tet. The first shuttle vector pE3.1-mini-EF1 α -rtTA-M2 contains a cassette for expression of the second generation reverse transactivator rtTA-M2 (13) flanked by restriction enzyme sites useful for insertion into the adeno-genome (Fig.1). To drive expression we constructed a 235 bp human EF1 α mini-promoter that contains the CAAT and TATA box promoter sequences but lacks the upstream enhancer and downstream intronic sequences. These segments were removed to avoid the possibility that any regulatory sequences present in them would interfere with regulation of viral gene expression after recombination into the adenoviral genome. Deleting the sequences also reduced the size of the expression cassette.

The original pE1.2 shuttle vector required the gene of interest be inserted as an entire expression cassette. For convenience, shuttle vector pE1.2-Tet was constructed. It consists of the pTRE-tight promoter containing seven copies of the Tet operator sequences embedded within a minimal CMV promoter (Fig. 1). Insertion of a gene of interest into the MCS places it under the DOX-regulated promoter flanked by recognition sites for DraIII, AlwNI, BstAPI and PflMI that enable subsequent insertion into the adeno-genome.

To test this system, we inserted an EGFP reporter gene into the pE1.2-Tet shuttle and constructed a single recombinant adenoviral genome by ligating the resulting Tet-regulated EGFP cassette into the E1 deletion region and the mini-EF1 α -rtTA-M2

cassette into E3 of AdenoQuickTM13.1, an adeno-genome vector. We recovered and purified recombinant EGFP adenovirus from human AD293 then used it to transduce HeLa cells at an M.O.I. of 10. Increasing amounts of DOX were fed to the transduced cells and the expression of the EGFP transgene was observed 24hr later by fluorescent microscopy and western blot analysis. EGFP expression was tightly regulated and highly induced by DOX treatment (Fig.2).

These results indicate that the new single genome adenoviral vector is a tightly regulated DOX-inducible system. This system provides the following advantages over other single genome adenoviral vectors: 1) the new EF1 α mini-promoter is smaller than previous promoters yet gave strong activity in driving second generation rtTA-M2 expression; 2) the new optimized DOX-responsive promoter pTRE_{-tight} displays extremely low background; 3) the bovine growth factor polyA sequences used in both shuttle vectors provides strong polyA tail sequences to maintain transgene mRNA stability.

Although rtTA-M2 was used in this study, we recently replaced it with a third generation reverse transactivator rtTA-M3. The resulting single genome adenovector showed an approximate two-fold increase in inducibility when compared to rtTA-M2 (data not shown). These two tightly controlled, DOX-inducible single genome Tet-On adenoviral vector systems should be particularly useful for gene therapy studies and as investigational tools.

Acknowledgement: This study was supported by a grant **W81XWH-07-1-0248** from DOD to G.T and L.M.A..

Competing interests Statement: The authors declare no competing interests.

References

1. **Kitamura, M.** 1998. Transgene regulation by the tetracycline-controlled transactivation system. *Exp Nephrol* 6:576-580.
2. **Gossen, M. and H. Bujard.** 1992. Tight control of gene expression in mammalian cells by tetracycline-responsive promoters. *Proc Natl Acad Sci U S A* 89:5547-5551.
3. **Gossen, M., S. Freundlieb, G. Bender, G. Muller, W. Hillen and H. Bujard.** 1995. Transcriptional activation by tetracyclines in mammalian cells. *Science* 268:1766-1769.
4. **Benihoud, K., P. Yeh and M. Perricaudet.** 1999. Adenovirus vectors for gene delivery. *Curr Opin Biotechnol* 10:440-447.
5. **Bett, A.J., W. Haddara, L. Prevec and F.L. Graham.** 1994. An efficient and flexible system for construction of adenovirus vectors with insertions or deletions in early regions 1 and 3. *Proc Natl Acad Sci U S A* 91:8802-8806.
6. **Nemerow, G.R.** 2000. Cell receptors involved in adenovirus entry. *Virology* 274:1-4.
7. **Luo, J., Z.L. Deng, X. Luo, N. Tang, W.X. Song, J. Chen, K.A. Sharff, H.H. Luu, et al.** 2007. A protocol for rapid generation of recombinant adenoviruses using the AdEasy system. *Nat Protoc* 2:1236-1247.

8. **Mizuguchi, H. and T. Hayakawa.** 2002. The tet-off system is more effective than the tet-on system for regulating transgene expression in a single adenovirus vector. *J Gene Med* 4:240-247.
9. **Mizuguchi, H. and M.A. Kay.** 1999. A simple method for constructing E1- and E1/E4-deleted recombinant adenoviral vectors. *Hum Gene Ther* 10:2013-2017.
10. **Mizuguchi, H., Z.L. Xu, F. Sakurai, T. Mayumi and T. Hayakawa.** 2003. Tight positive regulation of transgene expression by a single adenovirus vector containing the rtTA and tTS expression cassettes in separate genome regions. *Hum Gene Ther* 14:1265-1277.
11. **Danthinne, X.** 2001. Simultaneous insertion of two expression cassettes into adenovirus vectors. *Biotechniques* 30:612-616, 618-619.
12. **Danthinne, X. and E. Werth.** 2000. New tools for the generation of E1- and/or E3-substituted adenoviral vectors. *Gene Ther* 7:80-87.
13. **Urlinger, S. and Thellmann, M.** 2000. Exploring the sequence space for tetracycline-dependent transcriptional activators: novel mutations yield expanded range and sensitivity. *Proc. Natl. Acad. Sci.* 97:7963–7968

Figure Legends

Fig. 1. Construction of a single genome, DOX inducible adenoviral vector.

Two shuttle vectors, pE1.2-Tet-EGFP and pE3.1-EF1a-rtTA-M2, were constructed and inserted into the E1 and E3 deletion regions of adeno-genome through homologous recombination, respectively, as described in Materials and Methods.

Fig. 2. Induction of EGFP gene expression in HeLa cells infected by a single genome DOX-inducible adenovirus.

(A) Adherent HeLa cells were infected at an M.O.I. of approximately 10 using Ad-EGFP virus and then grown in culture medium containing different concentrations of doxycycline. Micrographs of infected cells were captured after 24h by fluorescent microscopy (magnification 100X). (B) EGFP expression at 24 h post-infection was also determined by Western blot.

Fig.1:

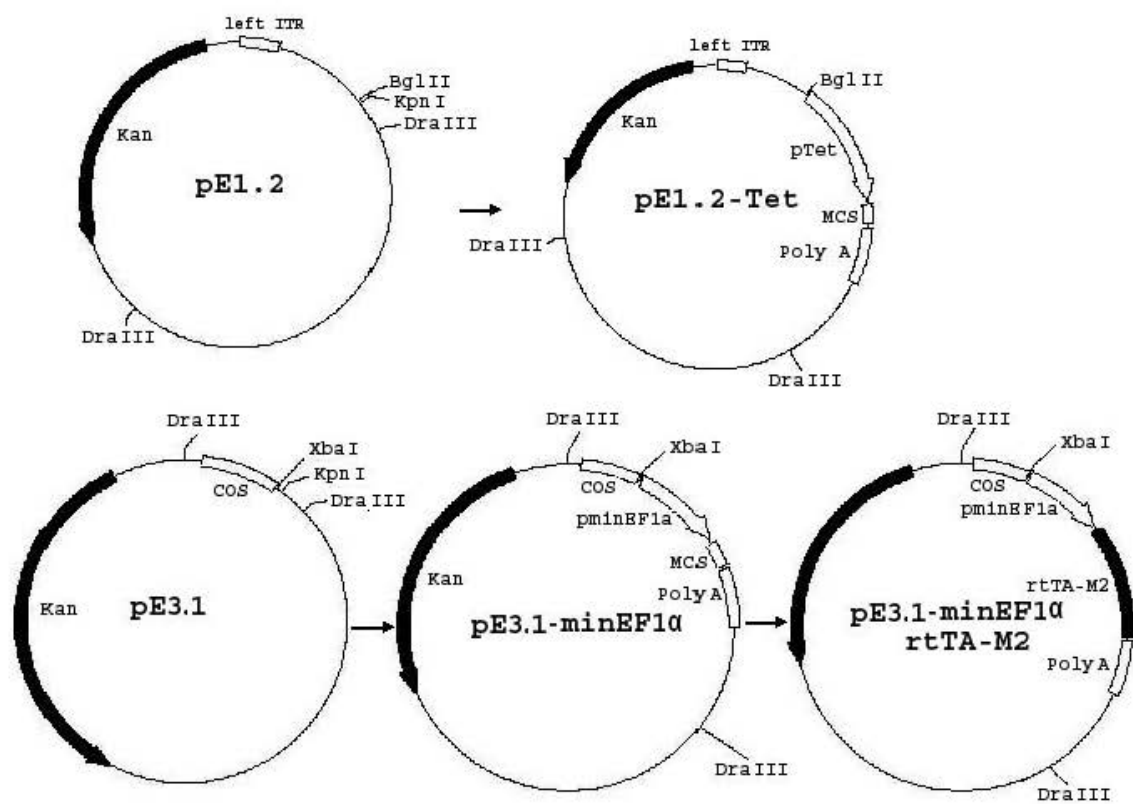
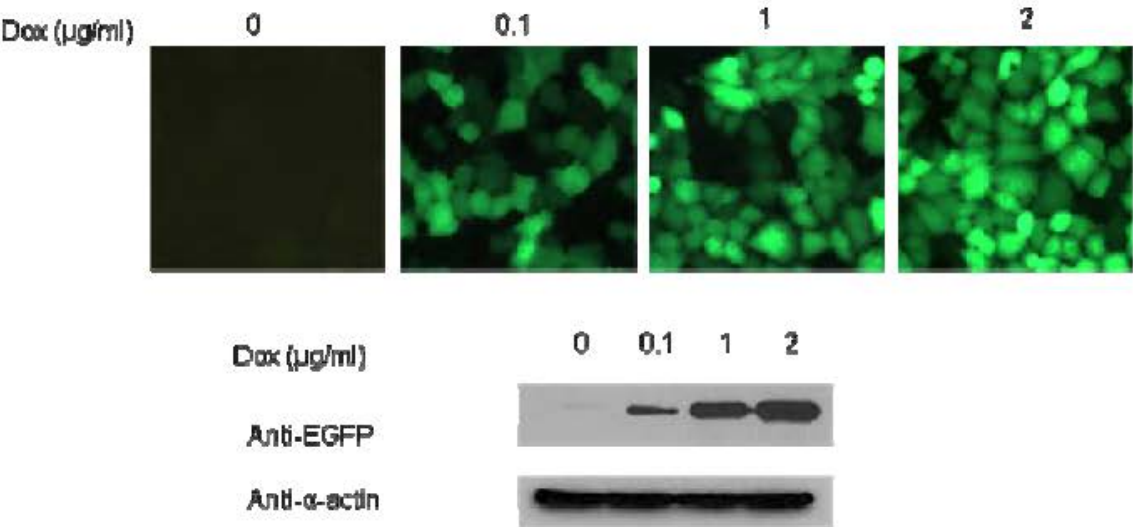


Fig.2



THE UNIVERSITY OF TENNESSEE INVENTION DISCLOSURE FORM

1. TITLE OF THE INVENTION.**MicroRNA-21 (miR-21)-based gene knockdown system****2. DESCRIBE THE INVENTION BRIEFLY.** *(If possible, attach a manuscript, a drawing, an abstract, or any other materials that would assist in the understanding of the invention.)*

This invention describes a microRNA-21 (miR-21)-based gene knockdown system. MicroRNAs are a class of non-coding small RNAs that negatively regulate gene expression by degrading the target messenger RNA (mRNA) or inhibiting protein translation. Increasingly, miRNA-based gene interference is being used as an alternative to gene knockout strategies, which are complicated by the need for embryonic stem (ES) cells, complex molecular manipulations and inefficient homologous recombination. In addition, gene knockout technologies are only feasible in experimental animal models in which ES cells are available (i.e., mice). **We have constructed a lentiviral vector that contains the ubiquitously expressed mammalian promoter *Ubiquitin (Ubc)*, plus exon 1, intron 1 and part of exon 2) driving expression of a bicistronic transgene that includes a recombinant miR-21 sequence and the enhanced green fluorescent protein (EGFP) reporter gene.** In this construct, the miR-21 sequence is inserted into intron 1 of the UBC gene, which may facilitate processing of the bicistronic transgene. The native miR-21 hairpin (targets include the tumor suppressor genes, *Pten*, *Pcdc4* and *Tpm1*) can be modified to target any gene of interest. We have generated and initiated testing of several gene targeting constructs on this backbone (e.g., *EGFP*, *Vasa*).

This miR-21-based gene knockdown system may provide advantages over miR-30- and miR-155-based gene knock down system systems that are commercially available from Open Biosystems and Invitrogen, respectively. First, the commercially available systems employ the cytomegalovirus (CMV) promoter, which drives high expression of recombinant transgenes in many cell lines, but is sometimes silenced in stem cells and during in vivo development. Stable expression of *Ubc* and other mammalian promoters has been demonstrated in stem cells and through development in transgenic animal models. Second, our initial investigations indicate that the commercial miR30-based system (Open Biosystems) exhibits incomplete processing of the miR-30 hairpin sequence and the EGFP reporter gene, which may negatively effect expression of both the hairpin and reporter gene. In our miR-21 based system, the bicistronic transgene was completely processed and this may have implications for the level of target gene knockdown. Third, our preliminary evaluations suggest that the miR-21 sequence may have enhancer activity that leads to increased expression of both the recombinant miR-21 and the reporter gene. These features need to be confirmed by additional designed experimentation.

3. CONTRIBUTORS/POSSIBLE INVENTORS. *(For a definition of the term "inventor," please refer to the document titled, "Who is an Inventor?," available from your Campus Research Office. All individuals who contributed to the conception of the invention should be listed below, whether or not they are affiliated with The University of Tennessee. Please note that a patent can be rendered invalid by including as an inventor an individual who did not contribute to the conception of the invention. The individual who is named in section A.1. below is designated as the primary contact for additional information and for all correspondence.*

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(signature of contributor)

(signature of contributor)

(signature of contributor)

(signature of contributor)

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_____	_____%	_____ (Date)

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Signature of Department Head

Date

9. **COMMENTS BY DEAN:** _____

Signature of Dean

Date

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1. TITLE OF THE INVENTION.

Lentiviral vector mediated antagomiR-21 in cancer and cardiovascular disease gene therapy

2. DESCRIBE THE INVENTION BRIEFLY. (If possible, attach a manuscript, a drawing, an abstract, or any other materials that would assist in the understanding of the invention.)

MiRNA are a new class of non-coding small RNAs that negatively regulate gene expression by either degrading mRNA or blocking protein translation. MiR-21 has been identified as an oncogene and highly expressed in most of cancers, such as breast, bladder, lung, pancreatic, ovary, cervical, gastric cancer, head and neck squamous cell carcinoma, glioma, myeloma, hepatitis-associated hepatocellular carcinoma, cholangiocarcinoma, chronic lymphocytic leukemia, uterine leiomyomas et al. This miRNA was also highly upregulated in hypertrophic cardiomyocytes and vascular injured rat models. There are several targeted genes of miR-21 identified, such as phosphatase and tensin homolog (PTEN), programmed cell death (PDCD4), Tropomyosin tumor suppressor genes. We designed a lentiviral vector to express the antisense miR-21 gene using human U6 promoter and found that miR-21 gene can be efficiently knocked down in cancer cells and vascular smooth muscle cells. We detected one of targets, PTEN and found that PTEN was significantly increased in vascular smooth muscle cells and B16 melanoma cells. A lentiviral vector we designed for knockdown miR-21 can be used for potential cancer or cardiovascular disease gene therapy by inhibiting cell proliferation during pathological conditions through gene delivery.

3. CONTRIBUTORS/POSSIBLE INVENTORS. (For a definition of the term "inventor," please refer to the document titled, "Who is an Inventor?," available from your Campus Research Office. All individuals who contributed to the conception of the invention should be listed below, whether or not they are affiliated with The University of Tennessee. Please note that a patent can be rendered invalid by including as an inventor an individual who did not contribute to the conception of the invention. The individual who is named in section A.1. below is designated as the primary contact for additional information and for all correspondence.

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Principal Investigator _____ Gabor Tigyi _____ Dept. _____ Physiology _____
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Signature

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